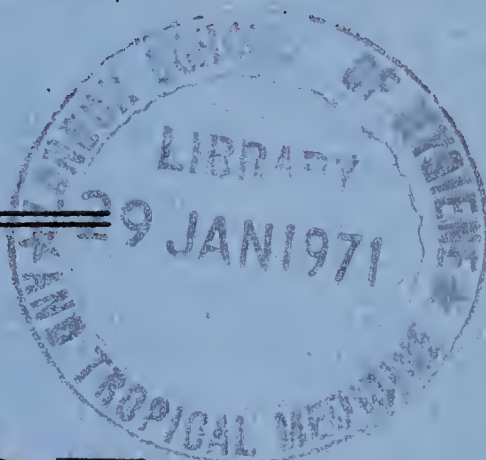


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- |                               |       |
|-------------------------------|-------|
| 1. <del>Mr Muston</del>       | B.415 |
| 2. <del>Mr Morley Parry</del> | A.421 |
| 3. <u>Mr Perry</u>            | A.405 |



COUNTY BOROUGH OF SOUTHEM-ON-SEA



# REPORT

ON THE WORK OF THE

PUBLIC HEALTH DEPARTMENT

For the Year 1968





COUNTY BOROUGH OF SOUTHEND-ON-SEA


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**PUBLIC HEALTH DEPARTMENT**

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## COUNTY BOROUGH OF SOUTHEND-ON-SEA

### HEALTH COMMITTEE

**Chairman:** Councillor C. L. Abbott

**Vice-Chairman:** Councillor P. J. King

#### **The Mayor**

Alderman Mrs. G. Poole  
Councillor C.M. Bidmead  
Councillor Mrs. M.M.C. Bullock  
Councillor M. Burstin  
Councillor Mrs. M.E. Conway  
Councillor V.M. Cooper  
Councillor A.R. Fuller  
Councillor Mrs. N.I. Goodman  
Councillor E. Lockhart  
Councillor T.A. Murray  
Councillor Mrs. J.M. Sargent  
Councillor Mrs. B. Scholfield  
Councillor J.R. White, B. Com.,  
F.C.I.S., F.I.B.

#### **Co-opted Members:**

J.C. Field, Esq., F.H.A.

Mrs. B.J. Pryor

Dr. M. Myers

#### **Representing:**

Southend-on-Sea Group Hospital  
Management Committee

Southend-on-Sea Local Executive  
Council

Southend-on-Sea Local Medical  
Committee

Civic Centre,  
Southend-on-Sea.

Telephone: Southend 49451

### ANNUAL REPORT

I present my report for the year 1968, a year which has seen great changes in the department. Following the retirement of Dr. J. Stevenson Logan in the preceding year, Dr. Preston and Mr. Beasant retired and my gratitude and sincere good wishes go with them.

The format of the report is somewhat altered with the statistical tables grouped at the rear.

I want to take this opportunity to thank all those who have contributed to this report and those who have assisted the Authority in their work, particularly the Hospital Management Committees, the Executive Council, St. John Ambulance Brigade and all the Voluntary Organizations without whose help the department's work would be so less effective.

I am indebted to my colleagues the Chief Officers of the Corporation and their staffs for the assistance they have so willingly given.

A handwritten signature in black ink, appearing to read 'G. Quill', with a horizontal line drawn underneath the name.

MEDICAL OFFICER OF HEALTH

**Vital Statistics 1968**

See Tables 1 and 2.

**Population**

The Registrar General’s estimate of the mid-year Home Population was 166,070 being 310 more than the previous year.

**Births**

There was a decrease of 86 in the number of births, a variation which is probably of no statistical significance. The number of illegitimate live births was 216, 24 fewer than the previous year.

**Stillbirths**

The total number of stillbirths rose by 7 to 35, giving a rate of 15.74 per thousand births compared with a rate of 14.0 - the national average.

**Infant Mortality**

There is an improvement in the rates for infant deaths, neo-natal deaths and early neo-natal deaths, but the peri-natal mortality rate rose,largely due to the deterioration in the stillbirth rate.

**Maternal Mortality**

One death occurred which could be classified as maternal mortality.

**Deaths**

There were 2,542 deaths, an increase of 261, representing an adjusted rate of 11.48 per thousand compared with 11.9 per thousand for England and Wales. There was an increase in both male and female deaths.

**Tuberculosis**

There were again 5 deaths from respiratory turberculosis giving a rate of 0.03 per thousand, an unchanged figure. There were two deaths from other turberculosis, including late effects, giving a rate of 0.01 per thousand.

**Cancer**

There were 500 deaths, (269 male and 231 female) an increase of 54.

**Cancer of the Lung and Bronchi**

The following table shows the number of deaths from these conditions registered in each of the preceding three years;

Year	Male	Female	Total
1965	112	28	140
1966	108	18	126
1967	91	23	114
1968	106	29	135

## Heart Diseases

The total assigned to these conditions increased by 103 to 890 (464 males and 426 females).

## Vascular Lesions of the Nervous System

The deaths attributable to this cause increased by 12 to 429 (145 males and 284 females).

## Violence

The total of deaths namely 23 (12 males and 11 females) from motor vehicle accidents decreased by 3. All other accidents caused 43 deaths, 5 more than in 1967.

The total deaths by suicide fell from 25 to 23, a significant proportion of the persons deceased having had a history of psychiatric disorders.

Age Group	Males	Females
15-21	-	1
25-35	2	-
35-45	-	3
45-55	2	3
55-65	1	5
65-75	2	3
75 and over	-	1

## Deaths of Children

Between the ages of 1 and 5 years, the deaths of 4 boys and 1 girl occurred, and in the 5 to 15 age group, those of 5 boys and 3 girls.



## STAFF OF THE PUBLIC HEALTH DEPARTMENT

### Medical Officer of Health:

G.V. Griffin, M.B., B.S., D.P.H.

### Deputy Medical Officer of Health:

J.C.Preston, M.R.C.S., L.R.C.P., D.P.H.

Retired 2. 5. 68

M.R. Mellor, M.B., Ch.B., L.R.C.P., D.P.H.

Appointed 1. 5. 68

### Assistant Deputy Medical Officer of Health:

Vacancy from 1. 5. 68

### Senior Assistant Medical Officers of Health:

Isabelle B. Barrie, M.B., Ch.B., D.R.C.O.G., D.P.H.

Brenda Emily John, M.B., B.S., M.R.C.S., L.R.C.P. D.P.H. Appointed 1. 9. 68

### Assistant Medical Officers of Health:

J. Greenhalgh, M.B., B.S., M.R.C.S., L.R.C.P., D.A.

L. H. Thacker, M.B., B.S., D.A.

Appointed 1. 8. 68

### Part-time Medical Staff: 5

### Principal Dental Officer:

E.C. Austen, L.D.S., R.C.S.

### Principal Lay Officer, Chief Welfare Officer and Ambulance Officer:

Ernest A. Beasant, M.B.E., F.I.S.W.

Retired 1. 2. 68

### Administrator, Health and Social Services:

R.W.G. Whitmore, A.C.C.S., M.I.O.M., M.R.S.H.

Appointed 25. 3. 68

### Chief Public Health Inspector:

E.A. Ellis, M.R.S.H., M.A.P.H.I.

### Deputy Chief Public Health Inspector:

T. K. Aston, M.R.S.H., M.A.P.H.I.

### Public Health Inspectors: 11

### Student Public Health Inspectors: 2

### Superintendent Health Visitor:

Miss E.M.M. Roberts, S.R.N., S.C.M., S.R.F.N., H.V. Dip., H.V. Cert.

### Health Visitors and School Nurses: 12 whole-time 7 part-time

### Tuberculosis Health Visitor: 1

### Superintendent of District Nurses and Non-Medical Supervisor of Midwives:

Miss D. Heaton, S.R.N., S.C.M., H.V.Cert., Q.N.

### Deputy Superintendent of District Nurses and Non-Medical Supervisor of Midwives:

Miss A. Bullen, S.R.N., S.C.M., Q.N., M.T.D.

### Midwives: 12

### District Nurses: 27 whole-time 2 part-time

<b>Principal Welfare Officer:</b>		
K. Golding, A.I.S.W.,		Appointed 12. 2. 68
<b>Deputy Principal Welfare Officer:</b>		
S. Rhodes, C.S.W.		Appointed 13. 5. 68
<b>Senior Social and Mental Welfare Officers:</b>		
J. Hummel		Appointed 1. 9. 68
W.L. Jones		" 1. 5. 68
K. Tolley		" 1. 9. 68
<b>Social and Mental Welfare Officers:</b>		6
<b>Welfare Assistants:</b>		5
<b>Social workers for the Blind:</b>		
Miss E.V. Gallagher		Appointed 1. 2. 68
Miss J.M. Maitland		" 19. 8. 68
<b>Matrons and Superintendents of Homes:</b>		
Roche Close	J.M. Owen	Appointed 1. 5. 68
Crowstone House	Mrs. E.E. Taylor	
Pantile House	Mrs. R.S. Keen	
Whittingham House	Mrs. J.A. Ball	Appointed 1.2. 68
Delaware House	Mrs. J. Spilstead	
Brooke House	Mrs. L.E. Smith	
Priory House	Mrs. G.A. Martin	
<b>Home Help Organiser:</b>		Miss N. Keay
<b>Deputy Home Help Organiser:</b>		Miss J.D. Mordecai
<b>Assistant Organisers:</b>		2
<b>Supervisor of Junior Training Centre:</b>		Miss P.E. Moulder
<b>Chiropody Staff:</b>		Whole-time 1      Part-time 5
<b>Administrative Staff:</b>		
<b>Senior Administrator, Family Health Services:</b>		S.F. Jupp, Redesignated 1.2.68
<b>Senior Administrator, Social Services:</b>		L. Mactavish, Appointed 1.5.68
<b>Senior Administrative Assistant (Health):</b>		Miss A.M. Roberts, Appointed 1.5. 68
<b>Administrative Assistant (Health):</b>		Miss G. Davy, Appointed 10.6.68
<b>Administrative Assistant (Welfare):</b>		F. Dupree, Appointed 19.2.68
<b>Administrative and Clerical Staff:</b>		32



The retirement of Dr. Preston and Mr. Beasant in the early part of 1968, following so closely the retirement of Dr. J. Stevenson Logan, requires special comment because both Dr. Preston and Mr. Beasant served the Authority so well for 33 years. They were both appointed in 1935. Dr. Preston was initially appointed as an Assistant Medical Officer and was promoted to Deputy Medical Officer of Health during the war years.

From the beginning of the war until some years after the Borough Sanatorium had become a National Health Service Hospital (Westcliff Hospital), Dr. Preston acted in a relief capacity to the Physician Superintendent, being closely involved with the infectious diseases occurring in the Borough; his clinical acumen and administrative ability was of great benefit to the hospital and the Borough. During this war period his advice and services were greatly appreciated, particularly during air raid incidents and the training and control of the Mobile First Aid Unit.

In the post-war years he did much to organise health control and the medical services at the Airport.

His interest in and knowledge of children was remarkable and his particular interest was with the handicapped child. He was concerned with the administration of the School Health Service, particularly with the setting up of the Hard of Hearing Unit and the Open Air School which has developed into a school for the physically handicapped. For many years he was clinical assistant to the Paediatric Consultant at Southend General Hospital and in this capacity was able to meet and talk to parents who had particular problems with handicapped children. This was very valuable with children in which there was mental subnormality or retardation and where the question of special schooling needed to be understood by the parents.

During my first few months in the department I came to appreciate Dr. Preston's pleasant, courteous and totally reliable personality. These qualities were appreciated by his colleagues, by the teachers with whom he had so much work to do and the many parents with whom he had contact. It was with genuine regret that the department wished him God speed when he left.

Mr. Beasant was appointed as Chief Clerk to the Department in 1935 and one of his first tasks was to re-organise the administration of the department on the opening of the Municipal Health Centre, which allowed the School Health work to be carried on from the same building as the other health functions of the Borough.

His service during the war was outstanding. He spent every night at the control centre and was on duty during more than 2,000 "alerts" which included every air-raid that Southend suffered. He was invaluable in the disposition of the resources available, liaison with other sections of Civil Defence Organisation and co-operation with the hospitals in the area.

When social welfare became the work of the Authority in 1948 he also served the newly-created Children's Committee. He dealt admirably with the re-organisation of the department which was involved, and eventually he was asked to undertake the day to day management of the Welfare Section of the Health Department, becoming eventually Chief Welfare Officer. He made great contributions to the administration of the services offering assistance to those handicapped by age or disability. He was the leading light in the provision of residential accommodation for the aged, being intimately concerned with the design and furnishing of the old people's homes, and his thoughts and ideals are still carried forward into the new homes which are being planned.

Because it was appreciated that there were very large areas of common ground between Social Welfare and Mental Welfare, the same Officers were made responsible for both. At the same time the Home Help Service was considered to be largely a welfare provision and administratively was included with Social and Mental Welfare work. The integration thus afforded made heavy demands on Mr. Beasant's abilities and the Authority owes him a great debt for the admirable way in which he welded together the many facets of Welfare work.

He was equally active in the voluntary sphere, being concerned with the St. John Ambulance Brigade, the Volunteer Car Pool, the W.R.V.S., and latterly Friendship Incorporated. It was a matter of gratification to all who know Mr. Beasant when his qualities were recognised by the award to him of the M.B.E.

Mr. L.G. Owen was appointed Sanitary Inspector here on 26. 9. 55. Although due to retire in August 1967 his services were extended until 30. 9. 68. During these thirteen years Mr. Owen served the Corporation well and he also served well the members of the public with whom he came into contact. He discharged the many duties of a public health inspector with skill and, even in the most difficult circumstances, acted with unfailing courtesy and sympathy.



SANITARY CIRCUMSTANCES OF THE AREA

Meteorology

The following is kindly supplied by the Meteorological Officer:-

Total sunshine for the year	1339.7 hours
Sunniest month	April
Days with sunshine	294
Total rainfall for the year	25.79 inches
Mean temperature	51°F.
Prevailing wind	West

Water

The statutory undertaker is the Southend Waterworks Company. Some water is obtained from deep wells but most is abstracted from rivers and all is treated. It is of moderate hardness, devoid of plumbo-solvent action and, as supplied, has a high degree of purity. The reservoir at Hanningfield provided an adequate reserve against the periods of drought which have been experienced since its erection.

The supply is piped and bacteriological examinations are made regularly, by the Company, of the water at various stages of its treatment and supply. Each week the Public Health Laboratory Service laboratory kindly reports on bacteriological samples submitted by this department, and from time to time, reports of the chemical analysis made by an independent laboratory are received, one of which is set out below:

Chemical Results in parts per Million

Appearance:	Clear and Bright	Turbidity (A.P.H.A. units):	Nil
Colour (Hazen):	3	Odour:	Nil
pH:	8.6	Free Carbon Dioxide:	Absent
Electric Conductivity:	980	Dissolved Solids dried at 180°C:	400
Chlorine present as Chloride:	182	Alkalinity as Calcium Carbonate:	35
Hardness: Total 90	Carbonate: 90	Non-carbonate:	0
Nitrate Nitrogen:	3.3	Nitrite Nitrogen:	0.01 approx.
Ammoniacal Nitrogen:	0.02	Oxygen Absorbed:	0.90
Albuminoid Nitrogen:	0.10	Residual Chlorine:	0.3 at sampling
Metals: Iron: 0.03	Zinc, Copper, Lead:	absent	
Fluoride:	1.2		

Bacteriological Results

Number of colonies developing on Agar:	(1 day at 37°C 8 per ml. Present in	2 days at 37°C 9 per ml. Absent from	3 days at 20-22°C 4 per ml. Most probable number
Presumptive Coliform reaction	- ml.	100 ml.	0 per 100 ml.
Bact. coli. (Type 1):	- ml.	100 ml.	0 per 100 ml.
Cl. welchii reaction	100 ml.	10 ml.	

This sample is clear and bright in appearance, fairly alkaline in reaction and free from metals apart from a negligible trace of iron. The water is fairly soft in character; its content of mineral and saline constituents is not considered excessive for a drinking water.. It is of satisfactory organic quality and bacterial purity.

These results indicate a pure and wholesome water suitable for public supply purposes.

With the exception of three dwelling-houses, occupied by five persons, all dwelling-houses in the borough are supplied from public water mains. There are no standpipes supplying water to dwelling-houses.

## **Fluoridation**

In June 1968 a Circular was received from the then Ministry of Health on the subject of fluoridation of the water supply and indicated that the Minister of Health had decided to extend the terms of the indemnity, announced in Circular 15/65 which he is prepared to give to Local Health Authorities and Water Undertakings. The Circular states that the 1965 indemnity against costs arising from proceedings on the grounds of injury to health was limited to actions started before the 3rd August 1970 and the Circular went on to say that the evidence that has been obtained since the Circular was issued in 1965 has in fact served only to confirm the safety of this valuable preventive health measure. The Authority was urged in the Circular by the Minister to adopt fluoridation at the earliest possible date and hoped that those Local Authorities who had not yet made arrangements for the fluoridation of the public water supply in their areas, to do so in order that the undoubted dental benefits which this measure confers, may be fully available in their area as soon as possible.

A full report on the matter and upon the discussion and correspondence which I had with the Medical Officer of Health of Basildon, the County Medical Officer and with the Ministry of Health regarding the possibility of adding fluoride to the local water supply at the recommended level of one part per million gallons was made to the Health Committee at the December meeting. Coupled with this report I also reported on the serious problem of dental decay, particularly among school children and reminded the Committee that any decision to add fluoride to the water supply would need the consent of other Local Authorities in the area.

The Committee resolved that the Council be recommended to agree in principle with the fluoridation of the water supply at a level of one part per million, subject to:-

- (a) The agreement of other Local Authorities receiving a common water supply.
- (b) Further consideration being given to the costs involved.
- (c) The Medical Officer of Health reporting thereon to the Committee in due course on these aspects.

However, when the Health Committee Minute came to be considered at the Council meeting in January 1969, the Council felt that they did not have sufficient information to reach a decision and deferred confirming the Committee's decision until such time as more information was forthcoming. The Minute was thereupon withdrawn.

Although it is not strictly within the scope of this report for the year 1968, the Health Committee at their meeting on the 13th January 1969, received a report on the circumstances leading to the withdrawal of this Minute and decided that the question of consideration of fluoridation of the water supply be deferred for a further six months in order to permit public discussion to take place on as wide a basis as possible.

Further details will be published in the Annual Report for 1969.

The fluoride content of the bore-hole supply varies between 1.6 and 2.9 p.p.m.: that of the river supply is 0.25 p.p.m. The twenty-one wells, used only in the Summer, have a content of 2.5 p.p.m.

### **Sewerage**

While the arrangements for sewerage and sewage disposal are adequate, extensive sewerage works are well advanced in consideration of the central redevelopment scheme.

### **Common Lodging Houses**

There are no common lodging houses in the area.



## **ADMINISTRATION**

### **PUBLIC HEALTH ACTS, 1936 to 1968**

### **NATIONAL HEALTH SERVICE ACTS, 1946 - 1952**

### **NATIONAL ASSISTANCE ACTS, 1948 - 1951**

### **MENTAL HEALTH ACT, 1959**

#### **See Table 3**

The administration of this legislation continued as in previous years.

### **THE NATIONAL HEALTH SERVICE ACT 1946, PART III**

#### **SECTION 21 - HEALTH CENTRES**

During 1968 work on the sketch plans for the health centre in Campfield Road, Shoeburyness, continued, and during November 1968 the Department of Health and Social Security signified their approval in principle to the scheme, and set a cost limit of £46,884 excluding the cost of furniture and equipment.

Prior to this, the Council had made available, on a temporary basis, two houses, Nos. 30 and 32 Elm Road, Shoeburyness, as temporary accommodation pending the completion of the new health centre, to three of the doctors in Shoebury who would ultimately be housed in the health centre. The doctors moved into their temporary surgery accommodation as from the 1st September 1968 and certain minor items of equipment, e.g. desks, chairs, scales, etc., were loaned by the Department from their present stocks at Warrior Square.

It is hoped that work will commence on the construction of the Shoebury Health Centre during mid-1969.

The site for the health centre in the central redevelopment area between Southchurch Road and the new ring road, at present being used as a car park, continued as such throughout the year and very little progress was made with the scheme.

During the year, no progress was made with plans or arrangements for either Leigh or the North Leigh/Eastwood centres.

#### **SECTION 22 - CARE OF MOTHERS AND YOUNG CHILDREN**

##### **See Tables 4 - 17.**

Clinics continue to be held at the following Centres:

Municipal Health Centre, Porters Grange Avenue:  
Mondays, Tuesdays, Thursdays and Fridays.

Leigh Clinic, 70 Burnham Road:  
Mondays and Thursdays.

Westcliff Clinic, 415 Westborough Road:  
Tuesdays and Fridays.



Kent Elms Clinic, Rayleigh Road:  
 Wednesdays and Fridays - Health Visitor's Clinic.

Blenheim Clinic, St. James's Church Hall:  
 Alternate Wednesdays - Health Visitor's Clinic.

Manners Way Clinic, St. Stephen's Church Hall:  
 2nd and 4th Tuesday in each month - Health Visitor's Clinic.

Earls Hall Clinic, Earls Hall Baptist Church:  
 1st, 3rd and 5th Tuesdays in each month - Health Visitor's Clinic.

North Avenue Clinic, Ferndale Road Baptist Church:  
 Thursdays - Health Visitor's Clinic.

Thorpedene Clinic, Maplin Way:  
 Wednesdays and Fridays - Health Visitor's Clinic.

Shoebury Clinic, Council Offices, High Street:  
 1st, 3rd and 5th Tuesdays in each month - Health Visitor's Clinic.

In 1968 the total of attendances fell by 1,552 from 27,095 to 25,543, although the number of infants and children attending increased by 46. The 1906 infants born in 1968 - an increase of 22 over the comparable group in 1967 - made only 14,083 attendances, representing a decrease of 844. This is unlikely, however, to be of great significance, indicating as it does that less than half of the infants in this group missed a clinic attendance on only one occasion.

Clinics staffed only by Health Visitors retained their popularity. At Kent Elms Clinic, instead of referring all mothers of children due for routine medical examination to the nearest clinic with medical staff, it was possible in cases where travelling was particularly difficult, to arrange for them to be seen by medical officers at the school and immunisation clinic at Kent Elms. Forty-eight such children were examined. At the end of the year, a similar arrangement was instituted at Thorpedene Clinic, where four children were seen.

### Welfare and Other Foods

The distribution of National Dried Milk and vitamins at clinics, by the W.R.V.S. and by certain retailers was continued.

While the demand for National Dried Milk, vitamin preparations and orange juice continued to decline, the sale of proprietary foods, distributed through child welfare clinics, rose from 16,912 packets in 1967 to 18,635. It is interesting to note that, compared with ten years ago when sales of National Dried Milk, at 37,173 tins, were over 21,000 more than last year, the sales of proprietary foods were virtually similar. Allowing for earlier weaning and lacking evidence of changed breast-feeding habits, one can only conclude that the mother of 1968, unimpressed by the image of National Dried Milk, is undeterred by the extra cost of the well-advertised proprietary food: in fact she is more likely to buy this at the chemist, ignoring the further reduction in price offered at the clinics.

### Ante-Natal Clinics

Municipal Health Centre:	Tuesdays, Thursdays and Fridays 9.15 a.m.
Leigh Clinic:	1st, 3rd and 5th Tuesdays in each month - 2.0 p.m.
Kent Elms Clinic:	2nd and 4th Tuesdays in each month - 2.0 p.m.
Westcliff Clinic:	Wednesday - 10.30 a.m. and 2.0 p.m.
Thorpedene Clinic:	Monday - 2.0 p.m.

Attendances rose from 9,811 to 10,597. This is mainly accounted for by the increased number of sessions during 1968 after a whole year's experience of the weekly session at Thorpedene Clinic and of the additional morning session at Westcliff. The number of individual expectant mothers in attendance also rose - from 2,209 to 2,466.

**Blood Examinations**

Investigation is made routinely of haemoglobin estimation, Price's Precipitation Reaction and of the Rhesus Factor. It is satisfactory to note that in spite of an increase in the incidence of venereal disease, no serum positive reactions occurred in 2,118 tests.

**Post-Natal Clinics:**

Municipal Health Centre		1st, 2nd and 3rd Thursdays.
Leigh Clinic	)	
Kent Elms Clinic	)	
Westcliff Clinic	)	Combined with Ante-natal Sessions
Thorpedene Clinic	)	

With the increase in the number of sessions held - from 188 to 247 - a welcome rise in the number of individual mothers attending can be reported. The 931 mothers, compared with 662 in 1967 - representing an increase of 40% - made 1,127 attendances, some 332 more than in the previous year.

**Relaxation and Mothercraft Classes**

These continue to be received with enthusiasm, although there was a slight falling off, both in the number of expectant mothers who attended and in the number of attendances made.

**Dental Treatment of Expectant and Nursing Mothers and Young Children**

The arrangements for dental examination and treatment of this class remained the same as for previous years, namely, that the facilities were offered to those who were referred by Medical Officers at the various clinics and those who sought treatment and advice on their own account. Nevertheless, the equivalent of 20 sessions were afforded.

The number of expectant and nursing mothers examined fell from 61 to 35, although all completed their treatment. There was a slight decrease in the volume of prosthetic work.

The increase in the number of fillings afforded to pre-school children reported last year was maintained, but there was a slight increase - from 112 to 122 - in the number of teeth extracted.

There are now facilities at the Dental Surgery for conducting radiological examination if necessary.

**Unmarried Mothers and their Children**

Of the 216 illegitimate live births recorded in the Borough, 21 became the responsibility of the Health Committee who provided residential accommodation through the agency of the Southend-on-Sea Branch of the Chelmsford Diocesan Moral Welfare Association. A great deal of assistance was afforded through this agency to others who did not require residential help. Assistance was also given by the Health Visiting staff and by the Children's Department staff.



**Hospital Maternity Services Liaison Committee**

This Committee continued its very valuable role throughout the year enabling close consultation to take place between all those concerned with maternity services.

**Stillbirths and Infant Mortality**

The variation this year in the following rates is not considered to indicate any significant alteration in trends.

The stillbirth rate is 15.74 per thousand total births which this year is 1.74 above the national figure. The perinatal mortality rate at 26.09 is 1.09 above the national rate of 25.0. In the case of the 35 stillbirths, congenital defect was reported as the cause of death in 12 cases. It was mentioned as a contributory cause of death in 2 more cases; of these 14 cases, abnormalities of brain and spinal cord were the major defects in 12 cases. The main factors associated with intra uterine death were those leading to placental insufficiency, including pre eclamptic toxæmia. The infant mortality rate, however, at 16.45 per thousand live births is 1.55 below the national rate of 18.0: 23 of the 36 infant deaths occurred within the first week of life: 15 of these deaths were due to prematurity and 5 were due to congenital abnormalities.

**SECTION 23 - MIDWIFERY**

**See Tables 18 and 19**

**Domiciliary Service**

During the year one midwife resigned to take Health Visitor Training and two were appointed; two members of staff attended Refresher Courses.

Miss Snelling from the Central Midwives Board made her biennial inspection on the 8th February, 1968.

The midwives conducted 368 deliveries in the patients' own homes, a reduction of 79 on the previous year and they continued the post-natal care of a further 950 mothers and their babies who were discharged from hospital maternity care before the 10th day of the puerperium. The midwives made 3,773 ante-natal home visits and 14,366 visits to carry out nursings for patients delivered at home and those who elected to be discharged early from hospital.

**Midwives' Ante-natal Clinics**

These were held as under:-

Municipal Health Centre:	Wednesdays 2.0 p.m.
Leigh Clinic:	Fridays 2.0 p.m.
Westcliff Clinic:	Mondays 2.0 p.m.
Thorpedene Clinic:	1st, 3rd and 5th Tuesdays, 2.0 p.m.
Kent Elms Clinic:	Thursdays 2.0 p.m.

**Midwives Act 1951**

Of 159 births which took place in a maternity home 73 were to Southend mothers.

## **Congenital Malformations**

The notification by the maternity unit and by domiciliary midwife of congenital defects apparent at birth, which is complete and satisfactory, is confirmed by subsequent enquiry at a later date and a periodic report is sent to the General Register Office.

## **Maternal Mortality**

This year one death was attributed to maternal causes, making a total of four since August, 1957.

## **SECTION 24 - HEALTH VISITING**

**See Table 20.**

It is with regret one reports staff shortage continues to impede extension and development of this vital service.

A lengthy illness was terminated by the death on March 25th of Mrs. Ursula MacGrath, a health visitor and school nurse who had been in your employ since 1949. Mrs. MacGrath had proved outstandingly successful in her work, possessing good judgment and achieved "a nice balance between what is desirable and possible", if I may quote Dr. Logan. Her passing was a great loss to her colleagues and the people she served so ably in Shoeburyness.

One member of staff resigned, one was appointed together with three part-time. 1967 was the first year of the new health visitor training scheme; trainees spend the last nine weeks in practice on the district under supervision. There are two health visitors under training who spend a period in the department prior to the commencement of the course; the students found the experience valuable.

The number of full-time and part-time equivalent health visitors is well below establishment, one which is artificially low based more on expectation of recruitment than on population and need in the area.

Re-organisation throughout the department placed increasing pressure on health visitors in post, some of whom approach or exceed the age of retirement. The Superintendent Health Visitor administers the section single handed without clerical assistance, and in an attempt to relieve the situation Mrs. Kellaway, health visitor, was appointed part-time on April 1st to undertake certain duties under the Nurseries and Child Minders Regulation Act, 1948, previously dealt with by Miss E. Roberts. Requests for advice, increase in numbers, etc., spot check inspection of registered premises occupies the whole of Mrs. Kellaway's time. The amendment to the Act in November requires any person who takes a child for two or more hours daily, for gain, to be registered. Pre-registration visits consequent on the amendment make heavy demands on area health visitors' and the superintendent's time.

The systematic courses provided by the health visitor and school nurse continued in some of your secondary modern schools for girls; invitations were received from women's organisations, students at various Teacher Training Colleges, pupil nurses and the Girls Brigade.

Your health visitors, Misses Blackbourn, Gaillard, Reeves, Simpson, Hill with physiotherapists Mesdames Smith and Griffiths are responsible for the joint mothercraft course and relaxation class held at five centres; these continue to attract appreciative expectant mothers.



It is with pleasure one records the establishment of your first Mothers Club, the M.N.O. "Mum's Night Out" Club), which meets at 7.30 p.m. every Thursday at Kent Elms Clinic. Miss Gaillard, health visitor, was their choice as chairman, and the number of mothers who regularly attend is a barometer of the club's popularity.

## **SECTION 25 - HOME NURSING**

This proved to be a very busy year for the Home Nursing Section. A total of 111,880 visits were paid by the district nurses during the year as against 99,758 in 1967. Visits to the over 65's increased slightly from 75,428 in 1967 to 75,565 in 1968 and the number of patients rose from 4,393 to 4,408 in 1968. Visits to the under 5 year olds fell from 111 in 1967 to 73 in 1968.

During the year 5 nurses were appointed to the staff and 4 staff resigned. On 1st September 1968 the district nurse based permanently at Roche Close and previously in the employ of the Essex County Council, came on to the department's pay roll and continued to deal solely with the patients in Roche Close,

During the year 4 nurses undertook district training and were successful in passing the examination. Miss D. Heaton, Superintendent of District Nurses attended a One-Day Conference at the Queens Institute in London on Attachment of Nursing Staff to General Practitioners. One nurse attended a three day Course on General Practitioner Attachment at Newham; 2 district nurses attended a one week's Refresher Course at Newham and one district nurse attended a One-Day Conference in London on Diabetes.

The bathing attendants employed by the department have continued to give very good service throughout the year. Their services have been greatly appreciated by the elderly house-bound patient, and they have been able to relieve the district nurses of routine bathings, thus enabling them to spend more time on the medical and nursing care of the patients. Another benefit is that the patients know in advance the approximate time they will be having a visit from the attendant and the attendant is able to spend a little more time with each patient.

Throughout the year the usual number of hospital students have visited the department at periodic intervals for visits of observation.

During 1968 discussions took place with the Marie Curie Memorial Foundation and I am happy to report that on 14.7.68, under the auspices of this Organisation, the Day and Night Nursing Service for terminal cancer patients in the Borough was commenced. A full report on the scheme was made to the June 1968 Committee. During the year a total of six cases were dealt with under this service, which is very much appreciated by patients and relatives alike.

### **Incontinence Pads**

The issue of incontinence pads has continued and increased during the year to 25,000, an increase of 3,000 over last year's issues. Their use is justified because it helps to extend the period when a person may not require the services of a home nurse or home help or be admitted to hospital or residential accommodation.

We extend our grateful thanks to Westcliff Hospital for their co-operation in continuing to incinerate such pads as cannot be disposed of in the home.

**SECTION 26 - VACCINATION AND IMMUNISATION**

**See Tables 23 - 25**

The arrangements made for vaccination and immunisation continued during 1968. The levels of immunisation approximate to the national averages and it is certainly desirable that the percentage of those protected in the community should be increased.

Protection against cholera, typhoid, tetanus and yellow fever continues to be available and is of course of great importance in an area attending a busy airport.

The total number of these vaccinations performed was 616 as compared with 688 in the previous year.

**SECTION 27 - AMBULANCE SERVICE**

**See Tables 26 - 33**

The administrative arrangements continued as before.

The local division of the St. John Ambulance Brigade provides, as the Corporation's agent, an accident and invalid transport service including the conveyance of infectious patients. Walking cases are conveyed by the Health Department's two sitting case ambulances (fitted with hydraulic lifts for the conveyance of chairbound patients), by the Hospital Car Service, and by cars of the Council's central transport pool.

Mileage has increased by 30,496 (6%) and patients by 3,158 (3%). A comparison of 1968 with 1960 shows increases of 126,520 (33%) and 12,325 (14%) respectively.

Patients conveyed by car account for 65% of the total, compared with 60% in 1960. Car mileage in 1968 was 71% of the total, compared with 63% in 1960.

**St. John Ambulance Brigade**

The St. John Ambulance Brigade conveyed 485 more patients than in 1967, accounted for by increases of 445 and 40 respectively in the numbers of patients conveyed to local Hospitals and Hospitals outside the Borough. The total mileage increased by 5,260.

I am indebted to Superintendent E. A. Harris, B.E.M., for the following report on the work of the Brigade:-

"Cases transported in 1968 show an increase of 485 over the previous year. It is encouraging to report that there was a decline in the number of injured requiring the Ambulance Service from accidents caused both on the roads (from 2,028 to 1,907) and in the home (from 496 to 452). At the same time, whilst welcoming the drop in the number of persons who sustained appreciable injuries as a result of home accidents, it must be borne in mind that the figures do not reveal the full picture of the prevalence of injuries which occur in the home. In the case of minor injuries, there is often no call made for ambulance assistance: the casualty attends his or her own doctor or is conveyed in a relative's car to hospital. There is no reason to believe that there has been any substantial reduction in the total number of accidents occurring in the home.

It is, perhaps, of interest to note that, with the exception of the first three months



of the year, the greatest number of street accidents in the Borough occurred between the hours of 2 p.m. to 4 p.m. In January, February and March, the peak periods came between 10 a.m. and 12 noon. There was a decrease in the number of infectious cases conveyed during 1968, but medical cases increased by 736 - a rise of 4.07% over the 1967 figure.

Each year there is a progressive growth in the number of patients conveyed to hospital whose condition is such that they are in need of medical attention, but where it has not been possible to contact their own doctor or obtain the advice of other medical practitioners prior to the removal.

During the year, 130 such cases were dealt with by the Ambulance Service and, although the numbers involved represent only 0.8% of the total number of invalid patients transported, this particular aspect of the work places upon the Ambulance personnel the greatest degree of responsibility."

### **Corporation Lift Ambulances**

The Health Department's two Lift Ambulances conveyed 498 more patients than in 1967, and their total mileage increased by 52.

### **Hospital Car Service**

The figures show increases of 12,790 miles and 992 patients compared with 1967. The most striking increase is shown in the number of patients conveyed to and from the three Artificial Limb and Appliance Centres at Roehampton, Gillingham and Cambridge. In 1967, 749 patients were conveyed to the three Centres, and for 1968 the figure is 947 - an increase of 198. Another notable increase is in the number of patients conveyed to and from the Occupational Therapy Department of Southend General Hospital - 2,104 compared with 1,234 in 1967 - an increase of 870.

### **Corporation Car Pool**

The total mileage increased by 12,394 and the number of patients by 1,183, compared with 1967. Approximately 95% of the Ambulance Service journeys carried out by cars of the Corporation Car Pool relate to the conveyance of patients to and from the Psychiatric Day Units at Runwell Hospital and the General Hospital, Rochford. 12,686 patients were conveyed to and from the General Hospital, Rochford (57 fewer than in 1967) and 5,563 to and from Runwell Hospital, an increase of 1,305 (30%) over 1967. These figures include a relatively small number of patients who were admitted.

### **Transport by Rail**

The number of patients conveyed by rail has decreased by 190, from 836 to 646. This decrease is due mainly to the transfer of one patient from a special Clinic in London, where he was receiving treatment twice a week, to the Outpatient Department of Southend General Hospital.

## SECTION 28 - PREVENTION OF ILLNESS, CARE AND AFTER-CARE

See Tables 34 - 36

### Tuberculosis

Dr. E.G. Sita-Lumsden reports that 204 new contacts were examined at the Chest Clinic during the year, of whom 4 were found to be suffering from tuberculosis. Contacts of patients made 718 attendances.

There were 24 households in the Borough in which an individual was known to be excreting myco-bacterium tuberculosis at some time during the year.

The 24 patients were classified as follows:-

- (a) 16 were positive for the first time
- (b) 2 were relapsed patients known to have been positive in the past
- (c) 6 were known positive cases.

The responses were:-

- (a) 9 were rendered sputum negative, 4 remained positive and 3 died
- (b) 1 was rendered sputum negative and 1 remained positive
- (c) 4 were rendered sputum negative and 2 remained positive

The number of known sputum positive persons at the end of the year was 7, being 2 more than in 1967.

Home treatment of tuberculosis is now well accepted as an adjunct to, and not as a substitute for, hospital treatment. Its success owes a great deal to the home nursing service which paid 1,240 nursing visits to a total of 28 patients.

During the year the domestic help service provided help for 5 households as compared with 7 in 1967. A daily issue of one pint of milk was made to 9 patients: 1,881 visits were paid by Mrs. Wilson the tuberculosis Health Visitor who also attended an average of five sessions at the clinic each month.

### B.C.G. Vaccination

- (a) **Contacts** (by the hospital service)

A total of 94 children and close relatives of patients suffering from tuberculosis were vaccinated with B.C.G., 18 more than last year.

- (b) **School Children** (by the Authority)

During each of the first three years of secondary education pupils are offered the heaf test. The acceptance rate again averaged 92.6% and the natural positive and conversion rates were similar to last year. Subsequent to the skin tests x-ray examination is arranged for Grade II, III and IV reactors, a facility also extended for the families of the two latter groups.



A child in second year of secondary school produced an acute allergic reaction to the heaf test and subsequent x-rays revealed that at the time of test she was incubating the disease. The source of infection was probably the grandfather but in view of the fact that a pupil in the same school year had been notified in 1967, the whole year was retested. No further cases were found.

No active disease was found in any other families of children with a marked reaction, although 8 children following a positive reaction were kept under surveillance.

Pupils from four private schools were included in this scheme of whom 50 representing 87.8% of those eligible were tested, their natural positive rate being 6.52%. Of this school population, 8.72% had already been vaccinated with B.C.G. The pupils at the Junior Training Centre were again skin tested with satisfactory results and where indicated B.C.G. vaccination carried out.

Pupils who have been vaccinated previously are heaf tested in their third year so as to defer any revaccination which may be required until they are about to leave school to enter an environment where the risks of infection are increased. Five pupils who had been vaccinated previously produced a Grade III or IV reaction but showed no evidence of active disease, while seven who had become skin negative again were revaccinated.

**Tuberculosis After-Care Sub-Committee**

The following statistics furnished by the Secretary, Mr.T.D.Garner, to whom we are much indebted, relate to the Tuberculosis After-Care Sub-Committee of the Civic Guild of Help, to which the Council make a grant. The amount disbursed by the Civic Guild amounted to £ 101. 8s. 11d. as compared with £ 84. 14s. 11d, in the previous year.

Type of Assistance	Number Assisted	Cost		
		£.	s.	d.
Heating and Lighting	1	14,	5.	0.
Insurances	2	38.	2.	11.
Special Needs	3	21.	16.	0.
Christmas Gifts	14	27.	5.	0.
Total number of cases assisted	20	£101.	8.	11.

**Chiropody**

The opportunity is taken in accordance with Ministry instructions to review the progress of the Chiropody Service since the issue of Circular 11/59 in which the Minister stated that he was prepared to approve proposals by Local Authorities to establish or extend the Chiropody Service.

The Minister’s approval to the Southend-on-Sea scheme was received on the 22nd August 1961 and envisaged at that time that initially the Service would be provided for persons over the age of 70. The Service was, however, in December 1964, made available to persons over 65 years of age, but in the light of subsequent experience it was regrettably decided in April 1966 to reduce the age limit to persons over 69 years of age. This was due to the numbers of people requesting treatment which, coupled with a great difficulty in obtaining the services of chiropodists, placed an impossible burden on the Service.

The Service continued on the basis of one full time chiropodist employed by the department, supplemented by sessional chiropodists employed in certain of the Council's clinics, but in 1967 we were fortunate to obtain the services of a second chiropodist. However, during the summer of 1968 this second chiropodist left the service of the Authority to obtain a slightly more rewarding position in the North of England and thus the waiting time for appointments for the patients again considerably lengthened.

For the year 1968 the statistics set out below are furnished in a form similar to that given in previous years.

The greatest difficulty which has been found in running the Chiropody Service is the difficulty in recruiting qualified chiropodists, partly because of a National shortage and partly because of the salary scales. However, during 1969 efforts were made to alter the whole basis of the Chiropody Service, whereby patients would visit private chiropodists in their own surgeries and a further report on this scheme will be made in my next report.

	Clinic	Domiciliary	Total
Number of sessions	1117	290	1307
Number of treatments given	8196	1711	9907
Number of patients treated	1277	562	1839

ILLNESS GENERALLY

Convalescent and After-Care Homes

During the year 56 patients were provided with recuperative holidays or after-care for periods of up to 3 weeks. The total cost was £910. 8s. 11d. towards which patients or their relatives were required to contribute £113. 8s. 6d.

Home Nursing Requisites

Requisites most commonly in demand are supplied on loan by the local division of the St. John Ambulance Brigade, to which the Council made a grant of £100 towards the cost of equipment. Superintendent Harris has kindly furnished the following information about articles loaned during the year:-

Patients assisted	1409
Articles Loaned, as under:	
Air-rings	91
Back-rests	144
Bed-cradles	162
Bed-pans	485
Commodes	202
Crutches (pairs)	86
Feeding-cups	22
Plastic Sheets	253
Urinals	123
Walking Aids	37
Walking-sticks	24
Wheel-chairs	252
Miscellaneous	10
	<u>1891</u>



There are, however, appliances which add much to the well-being of gravely disabled patients, the cost of which the voluntary organisations are not expected to meet and which have therefore been purchased by the Council. These include 15 hoists by which patients can be lifted from bed to chair and from wheelchair to bath, and 10 special beds which enable desirable postures and attitudes to be attained and maintained.

**Cervical Cytology**

Four clinics per month were held this year with two doctors attending each clinic.

First Attendance	Repeats	Failed to Attend
1,397	203	207

**Total Appointments made:** 1,807

Cancer cells were found in the specimens taken from eight women. These women were immediately referred to hospital for further advice and treatment. All but one of these women were over the age of 35 years. One women was aged 29.

132 conditions were noted and arrangements were made with the general practitioners for further advice and treatment.

Post menopausal bleeding	4
Intramenstrual bleeding	4
Erosion	9
Polyps	8
Infection:	
Trichomonas	37
Monilia	13
Other	13
Cancer cells	8
Cell irregularities	18
Dyskaryopsis	3
Bartholin Cyst	1
Fibroids	4
Breasts	9
General condition	1

**SECTION 29 - DOMESTIC HELP**

This service is one of the most vital of the domiciliary services; it contributes very largely to the elderly being able to maintain their own homes and independence when their physical powers begin to decline. That the staff of the Domestic Help Section require training to enable them to exploit fully their opportunities for helping the needy has been recognised nationally.

The first training course for domestic helps commenced in September 1968 organised by the College of Technology and by November 1968, 12 domestic helps had completed the course and had been awarded diplomas and badges. The course will continue to be held.

Help was provided for 2,568 cases, an increase of 121.

	Aged 65 or over on first visit in the year	Aged under 65 on first visit in the year				Total
		Chronic sick and tuberculous	Mentally disordered	Maternity	Others	
No. of Cases	1,912	115	25	287	229	2,568

When the financial circumstances of an applicant do not require the Committee to make a charge at the standard rate, what is to be paid for the domestic help provided is determined according to a scale.

Staff employed:-

	on 1.1.68	on 31.12.68
Full-time	23	21
Part-time	<u>236</u>	<u>237</u>
	<u>259</u>	<u>258</u>

### SECTION 51 - MENTAL HEALTH

See Tables 37 - 41

The work of the social and mental welfare officers continues in the same pattern as in previous years. There were 626 persons referred to the department for mental health problems, 28 more than the previous year: of these, 229 were referrals not requiring admission to hospital. The total number of admissions to psychiatric hospitals is 397, being 15 more than the previous year. The other figures follow a similar pattern to previous years.

#### Subnormality

The original shortage of beds in hospitals for the subnormal continues to impose problems on the Authority's officers concerned with the adequate placement of some members of the community.

#### Southend & District Society for the Mentally Handicapped

This organisation continues to assist and encourage both the mentally handicapped and their parents. It conducts an occupation centre for adult males in accommodation provided by the Council, and shows much interest in the work of the Junior Training Centre. Equally important, it affords advice to relatives and stimulates public support and sympathy for this work.

#### Social Club for the Mentally Handicapped

The Tuesday evening social club for adult subnormal persons has continued to be very popular and fills a most valuable role in providing not only recreation, but some measure of 'useful training, for a number of those for whom, pending the establishment of an adult



training centre, there is no other provision. It is maintained on a voluntary basis, with minimal financial assistance from the local authority, and its success is entirely due to the goodwill, time and effort generously given by a number of people, both members of the local authority staff and others. In particular, it owes a very great deal to Miss Moulder without whose continued and unsparing support it is doubtful if the club could have achieved so much, or indeed, have remained in being.

**Junior Training Centre**

The work of the Centre continued throughout the year and 64 trainees were in attendance.

**Waiting Lists at 31.12.68.**

	Male	Female
No. of patients awaiting admission to hospital	5	9
No. of patients awaiting admission to Junior Training Centre	-	-

**Short-Term Care**

Number of mentally subnormal persons for whom short-term care was arranged by the Local Health Authority under the Mental Health Act 1959.

	Under age 16		Aged 16 and over	
	Male	Female	Male	Female
National Health Service Hospital	3	1	-	1
Elsewhere	<u>2</u>	<u>7</u>	<u>7</u>	<u>18</u>
	<u>5</u>	<u>8</u>	<u>7</u>	<u>19</u>

**Patients employed at 31.12.68**

	Male	Female
At Industrial Centre	18	1
In open employment	51	58

**Social Club - over 16 years**

Tuesday evenings 7 - 9.30 p.m.  
Number attending 80.

**NATIONAL HEALTH SERVICE ACT, 1946 PART IV**

**General Medical and Dental Services**

**Pharmaceutical Services and Supplementary Ophthalmic Services**

The services provided under Part IV of the Act are controlled by the Local Executive Council, a body appointed by the Minister of Health. Certain members of the Council continue to serve on it, and there is a very pleasant relationship between these bodies.

The following extracts from the Report of the Local Executive Council for the year ended 31st March 1968 are included by kind permission of the Chairman, Dr. H.F. Hiscocks, to whom, as ever, I am much indebted.

“ Membership - During the year the following members left us:

Dr. R. Kemmerling, Councillor J.R.Pearson, Alderman R.E.J. Thomas, Mr. W. Leigh-Breese and Dr. J. Stevenson Logan.

To each one we give our grateful thanks for their service. Mr. W. Leigh-Breese and Dr. J. Stevenson Logan had been Council members since the inception of the Service and a special debt of gratitude is due to each of them for their never failing help and advice in their own particular field. On his succession as Medical Officer of Health to the County Borough in October, Dr.G.V.Griffin replaced Dr. J.Stevenson Logan and to him we give our welcome. We also welcomed as new members, Mrs. M.A. King, Councillor Mrs. A.B. Scholfield, Dr. F.A. Almond and Mr.R.B. Warburton.

On 31st July the Deputy Clerk, Mr.E.C. Day, retired. He had given long and faithful service since 1948. Mr. E.C. Day’s duties have been taken over by Mr.D.G.Davies, who became the new Deputy Clerk on 1st August.

The Twentieth Annual Meeting of the Executive Councils’ Association of England was held at Torquay on 19th and 20th October. The Council was represented by Mr. H.Cloke, Mr. O.A. Moss, the Clerk and myself. Naturally this was a great occasion for me, when I took office as President of the Association for the ensuing year.

Throughout the year considerable further discussion and negotiations took place concerning the siting and accommodation of a Health Centre in Shoeburyness. It is pleasing to be able to report that a site has been agreed upon, and the Local Authority is awaiting a decision on a scheme shortly to be submitted.”

**General Medical Services**

**Medical List**

On the 31st March 1968, the names of 88 doctors were included in the Council’s Medical List as set out below:-

Principals for whom this Council is responsible	67
Principals for whom other Councils are responsible	17
Principals with Limited Lists for whom this Council is responsible	2
Principals providing Maternity Medical Services only	<u>2</u>
	<u>88</u>

**Classification of Practice Areas**

The Council’s practice areas and their classifications are as follows:-

Practice Area	Classification
Southend-on-Sea and Thorpe Bay	Designated
Westcliff-on-Sea	Open
Leigh-on-Sea and Eastwood	Open
Shoeburyness	Intermediate

**Persons on Doctors’ Lists**

The estimated population of the County Borough of Southend-on-Sea on the 1st July 1967, was 165,760, and the number of persons registered with medical practitioners at that date was 174,341 (105.17%) a degree of inflation fractionally less than last year.

**Pharmaceutical List**

On the 1st January, 1968, the numbers of chemist-contractors included in the Council’s Pharmaceutical List were as follows:

Pharmacies	48
Appliance Suppliers	15
	<u>63</u>

**General Dental Services:**

**Dental List**

On the 1st January 1968, the names of 44 dental practitioners were included in the Council’s Dental List for the purpose of providing general dental services under the National Health Service. The number of full-time dental assistants employed by principal practitioners was two.

**Replacement of Dental Appliances**

Applications from 21 persons for the replacement of dental appliances were considered during the year. The decisions taken and the amounts payable by patients and by the Council were as follows:-

	Number of cases
Whole cost to be borne by the Council	10
Whole cost to be borne by the patient	6
Part of cost to be borne by patient	5
	<u>21</u>



**Supplementary Ophthalmic Services**

**Ophthalmic List**

On the 1st January, 1968, the following were included in the Council's Ophthalmic List:-

Ophthalmic Medical Practitioners	7
Ophthalmic Opticians	26
Dispensing Opticians	10

**Sight Tests**

The number of sight tests paid for in the past two years were:

1966/'67	1967/68
33,294	32,932

**INFECTIOUS DISEASES**

**See Table 42**

The incidence of measles was acceptably low, no doubt due in part to measles vaccination which commenced in June.

A child, newly arrived from Pakistan, was the one case of typhoid, the infection probably originating in his home country. Prolonged investigations of the rest of the family failed to show a source and eventually they left the town.

Two of the cases of meningococcal meningitis occurred within three days of each other and geographically close by, but no common source was found.

An interesting case of Leptospirosis occurred in a man working outside the County Borough in a Trout Fishery where rat infestation had needed to be treated. This disease is caused by an organism transmitted via water and rat urine. The man was known to have cleared out a fish pond at work.

Although the number of notified cases of food poisoning was double that of last year, no particular source of infection was found and no large outbreak occurred.

The Public Health (Infectious Diseases) Regulations 1968 came into effect on the 1st October. Under these regulations acute influenzal pneumonia, acute primary pneumonia, acute rheumatism, erysipelas, membranous croup and puerperal pyrexia are no longer notifiable but the following are added to the list:

- Cholera
- Infective Jaundice
- Leprosy
- Leptospirosis
- Tetanus
- Yellow Fever

All provisions governing the notification of infectious disease and food poisoning are now to be found in Sections 47 to 49 of the Health Services and Public Health Act 1968 and these regulations. Infective jaundice, of course, has been notifiable in Southend for many years.

**Tuberculosis**

**See Tables 43 - 46**

Dr. E.G. Sita-Lumsden, consultant physician for tuberculosis, and the staff at the Lancaster House Chest Clinic have been kind enough to furnish much of the information presented in this section.

**Notifications**

**(a) Respiratory**

Persons notified totalled 42 of whom 13 males and 13 females were Southend residents, representing a decrease of 4, while there were 5 fewer inward transfers. Although it is reassuring to observe that nearly half the notifications were of persons who contracted the disease while living elsewhere, as will be seen from the table, 5 men and 2 women between the ages of 25 and 45 were ordinarily resident here, so attempts to prevent tuberculosis must be unremitting.

**(b) Non-respiratory**

Non-respiratory conditions occurred in 2 men and 5 women, sited as follows:-

	Male	Female
Cervical glands	1	4
Pelvis	-	1
Genito-urinary	1	-

**Deaths**

There were 2 male and 4 female deaths from respiratory disease, one more than in 1967, and 1 death from a non-respiratory condition.

**Respiratory**

Male aged 71	Admitted to Rochford General Hospital 1.5.68. Notified 28.6.68, died the following day.
Male aged 73	Notified 1927. Removed to Southend 1961. Under surveillance until date of death.
Female aged 54	Notified 1954. Removed from register as recovered 1961. Death primarily due to bronchopneumonia and congestive heart failure.
Female aged 68	Notified 1945 (tuberculosis of knee). Removed from register as recovered 1962. Re-notified P.T.B. 18.3.68. Died 24.4.68.
Female aged 78	Death is not regarded as being due to tuberculosis.
Female aged 86	Posthumously notified after post-mortem.

**Non-Respiratory**

Female aged 75	Notified 1959.
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Mass Radiography

The Unit did not visit Southend in 1968.

Cancer

There were 500 deaths directly attributable to malignant disease, 269 male and 231 female. Cancer of the lung and bronchus accounted for 27%, over three-quarters of these being male. Cancer of the stomach accounted for 11%, males predominating 3 to 2, cancer of the breast 10%,and only 2.5% were due to cancer of the uterus. There were five deaths under 35 years of age due to malignant conditions. There are of course other deaths associated with malignant disease where the prime cause of death, for instance pneumonia, would not indicate the basic condition.

Venereal Diseases

Dr. A.R. Wisdom, consultant venereologist, has been kind enough to supply the statistics of the work done in the hospital clinics. The number of new cases of gonorrhoea notified shows a marked decrease from last year, but this may be only a temporary remission and too much importance should not be attached to a single year's figures.

It is still unusual to find a sero-positive ante-natal mother but constant vigilance is required to ensure that the very occasional patient will not be missed.

Newspaper advertisements continue to be displayed each month setting out the days and times of the clinic sessions, as this continues to be a most valuable facet of health education.

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
New cases (Syphilis)	10	18	4	3	9	16	14	6	6	7
New cases (Gonorrhoea)	66	47	45	76	132	119	98	77	92	56
New cases (other venereal conditions)									431	370
Total attendances	2886	3082	2683	2247	2248	2147	2044	2284	2565	2350

Crematorium

During the year 2,661 cremations were carried out at the Southend-on-Sea Crematorium.

Children in Need

Joint Circular of July 31st 1950  
Ministry of Health Circular 27/54 "Prevention of Break-up of Families"

The work of this conference has shown very little change, although our meetings have been as helpful as ever. During the year 102 families were considered by the conference, involving 178 agenda items.



**Nurseries and Child Minders (Regulation) Act, 1948**

Arrangements under this Act were fully described and discussed in the Annual Report 1950, pp 81 and 82. No serious contraventions were found during the year, and conditions were generally reported to be satisfactory.

All premises at which it is proposed to use an oil burning space heater are inspected by the chief fire officer and compliance with his requirements is made a condition of registration. The assistance we receive in this matter is gratefully acknowledged.

During the latter part of the year two important Circulars were issued.

- (1) Circular 36/68 concerning Health Services and Public Health Act, 1968, Section 60 Amendments to the Nurseries and Child-Minders Regulation Act 1948. This legislation became operative on 1st November 1968 and extended the scope of the 1948 Act to include children under five years looked after for periods of two hours or more for reward whether in "premises" or the minder's own home.
- (2) Circular 37/68 - Day care facilities for children under five years. This circular outlined the types of children requiring day care and the types of care likely to be available and included a very valuable memorandum on Standards for Day Care of Pre-school Children.

**Registration of Premises (Section 1(i)(a))**

Registrations in force January 1st 1968	24
Registrations in force December 31st 1968	27
Applications not proceeded with	11
Applications refused by Committee	1
Total number of children "permitted" at December 31st 1968	735
Number who ceased attendance at registered premises	467
Total number of children under supervision during the year	1137
Total visits of inspection	287

**Registration of Persons (Section 1(i)(b))**

Registrations in force January 1st 1968	48
Registrations made during year	23
Registrations cancelled by consent during year	17
Registrations in force December 31st 1968	56
Applications not proceeded with	16
Number of children "permitted" at December 31st 1968	340
Number of children who ceased attendance at minders	230
Total children under supervision during year	532
Total visits of inspection	461

**PUBLIC HEALTH (AIRCRAFT) REGULATIONS 1966**  
**ALIENS ORDER 1953**  
**COMMONWEALTH IMMIGRANTS ACT 1962 & 1968**

The figures in Table 47 relate to customs movements and do not include internal flights within the United Kingdom. There was a substantial decrease over the previous year, aircraft movements being 19,049 compared with 23,956 and passenger movements 477,321 compared with 660,498.

Although the medical staff of the Health Department hold warrants as medical inspectors of aliens and commonwealth immigrants, these duties are normally carried out by a panel of general practitioners who are remunerated in accordance with a scale of fees when they are summoned to the airport, either by the Immigration Officers in respect of these statutory duties, or by the Airport Control Staff in respect of ordinary calls for medical aid in cases of accident or illness.

At the present time there are eight general practitioners who hold warrants as medical inspectors. The Airport Health Authority has no permanent staff on duty at the airport and the present volume of work would not justify full time medical "cover". Although a substantial number of aliens and commonwealth immigrants enter the country via Southend Airport, the majority of them are short-stay holiday visitors. There has however, been some increase in the number of those who intend to stay in this country longer than six months, or who for other reasons are within the specified categories whom the Immigration Officer may refer for medical examination. Hitherto the number actually referred for examination has been very small, but there is reason to think that it will increase.

Reference will be found in the section dealing with the work of the public health inspectors, to the freight traffic at the airport which includes a considerable amount of imported foodstuffs which are subject to inspection.

**MEDICAL REPORTS**

**See Table 48**

Only 291 examinations were carried out in comparison to 403 last year. This was essentially due to a ready supply of fully qualified teachers in the Education Department obviating the need for employment of temporary staff — mainly pupils waiting for university or college placings. Medical officers scrutinised 1407 questionnaires, referring for examination only those whose employment prospects were doubtful. The questionnaire serves not only to protect the local authority but also affords medical officers an opportunity to advise certain applicants as to more suitable occupation consistent with their physical or mental state. It is pertinent to add that only a very low percentage of candidates are found medically unsuitable for the post for which they apply.



## NURSING HOMES

Homes on Register at end of year		No. of beds provided		
		Maternity	Other	Total
40 Crowstone Avenue	Avenue	-	9	9
13 Cobham Road	Aylward	-	14	14
46 The Broadway, Thorpe Bay	Broadway	-	6	6
39 Imperial Avenue	Langley-Lodge	-	23	23
174 Kings Road	Leigh	-	11	11
25 Chalkwell Esplanade	Lulworth Court	-	20	20
77 Wimborne Road	Oak House	-	16	16
54 Salisbury Road	Salisbury House	9	-	9
122 Crowstone Road	Trenow House	-	16	16
407 Westborough Road	Two Ways	-	7	7
		9	122	131

### Co-ordination and Co-operation

Association between the department and hospitals as well as with general practitioners has been cordial and progressive for a long time. Prior to 1948 appointments to the consultant staff at the Municipal Hospital were invariably restricted to the specialists of the Southend General Hospital. In addition, members of the Council have been nominated for the appropriate hospital management committees and the local executive council; your medical officer of health or his deputy have served on all of them.

Accommodation has been made available for some hospital purposes such as school ophthalmology, orthoptics and occupational therapy, and there has been joint employment of speech therapists and physiotherapists. The deputy medical officer of health and the senior assistant medical officer of health act as clinical assistants to the consultant paediatrician (who is also appointed to the open air school).

Since 1948 all the Council's ante-natal clinics have been staffed by the hospital consultants and registrars, while Part I midwifery pupils have been taught there. Women have always been able to come to the clinics without referral by their medical practitioners but in recent years much use has been made of these facilities by local doctors, with whom some of the ante-natal care is shared. The selection of patients for admission to the maternity unit is very largely made by the hospital consultants through the ante-natal clinics and they are furnished with social and environmental reports by the midwives. "Early elective discharge" the system whereby women can be delivered in hospital, discharged home within as short a period as twelve hours and subsequently cared for by your domiciliary midwives, has become popular and much sought after. The arrangements are made early in pregnancy, there is full association of the midwives in the appropriate ante-natal care, they are consulted as to the suitability of the home to which the mother and her baby are to be returned, and the department pays special attention to the provision of home help and the continued midwifery service to the patient.



The hospitals also have close contact with the home nursing service, and co-operation is very satisfactory. There is a substantial number of old people in this area for which reason it has been advantageous to unify the welfare and mental health activities of the department and to employ staff who undertake both responsibilities. The social and mental welfare officers visit the psychiatric out-patient sessions and attend case conferences at the hospitals. Community care is afforded at the request, and on the advice, of the psychiatric consultants. The assistance we receive from them and from the other "approved" practitioners is invaluable in the discharge of difficult duties and the acceptance of much personal responsibility.

Nor has the general practitioner been forgotten. For at least forty years one has been co-opted to the Health Committee and since 1948 the local medical committee has made the nomination. During the year, plans were laid for the G.P. attachment of district nurses. It is not at present practicable to allocate health visitors or domiciliary midwives to specified practices, but direct contact between the medical profession and their ancillary colleagues is encouraged and very well developed. With few exceptions the doctors at your infant welfare centres have always been general practitioners. The fact that the department is responsible for welfare leads many practitioners to seek assistance for individual patients, and representations are constantly made regarding those for whom the essential hospital admission cannot be obtained. It is not too much to say that your officers have admitted to your Part III accommodation some people who ought properly to have been in hospital, and general practitioners are grateful for the assistance we have given.

### **Public Mortuary**

The Hospital Management Committee provide facilities for public mortuary accommodation at the hospital, an arrangement which has worked satisfactorily and which has relieved the department of certain administrative difficulties.

It is pleasant to acknowledge this assistance, and to express appreciation of the help we have received from the consultant pathologists and staff and the hospital administration.

The costs are shared proportionately.

**Mr. E.A. Ellis, M.R.S.H., M.A.P.H.I., Chief Public Health Inspector reports:**

The work of the public health inspectors is of a very varied nature and, as will be seen from the Statutes and Regulations listed in the statistical report, deals with every facet of human existence. Additions are constantly being made to the legislation administered by the department and this is especially true of regulations relating to food control. No less than thirteen sets of such regulations have been made in the last two years.

Legislation regarding the construction of food premises and the conduct of food handlers is necessary to ensure the provision of proper facilities and to enable the local authority to deal with persons who persist in unhygienic practices. In the long run, however, it is the persons employed in food premises who are responsible for the safety of the food consumed by the public. For this reason the education of food handlers in hygiene has always been considered an important part of the duty of a public health inspector. The Royal Society for the Promotion of Health recently instituted a Certificate in the Hygiene of Food Retailing and Catering for people who had undergone a recognised course of training and passed the appropriate examination. Candidates are required to answer fifty questions on a written paper and to undergo an oral examination. During 1968 in association with the South East Essex Area Composite Health Committee two courses of instruction were organised at the Southend-on-Sea College of Technology. One course was held during the day time and the other in the evening and each course attracted forty students. Fifty-nine candidates sat the examination and forty-nine were successful. It is evident that there is a demand for such instruction amongst people employed in the food trade, to such an extent that a large number were prepared to give up one evening a week for thirteen weeks to attend the course, and there can be no doubt that these people will play a large part in reducing the risks of an outbreak of food poisoning.

The bacteriological examination of cockles from the Sheds at Leigh-on-Sea continued to be carried out weekly, and a total of 326 analyses was carried out on samples taken from the eight Sheds in operation. It is pleasing to be able to report that 81% of the samples were found to be Grade 1, 15% Grade 2 and only 5% Grade 3. When reports gave Grade 2 or 3 steps were taken to check the methods in use at the Sheds concerned.

Over 300 samples of food were subjected to chemical analysis during the year and none was found to be adulterated. In 32 cases, however, the label either did not comply with the relevant regulations or did not accurately describe the contents of the packet. In several cases pre-packed cooked beetroot containing acetic acid were exposed for sale in a pack which gave no indication to the purchaser that acetic acid was, in fact, present. A number of imported cheeses were found not to be labelled in accordance with the Cheese Regulations 1965. Two samples of orange drink contained excessive preservative and two samples of imported fruit juice were found to be cordials.

During the year regulations came into force which laid down the minimum meat content of various types of meat pie and sausage rolls. A number of samples were found to be deficient in meat, possibly due to the manufacturers being unaware of the legal standard. On being advised of the situation, adjustments were made in the recipes in use.

In all cases where the samples were found to be unsatisfactory the importers or manufacturers concerned were advised, and in no case was it necessary to take legal proceedings in order to enforce compliance with the Regulations.

During the year a total of 88 visits was made to inspect swimming pools which are increasingly being provided at schools in the County Borough. With the approval of the Education Department and the Head Teachers concerned, checks were made on the purity of



the water used in the pools and the techniques in operation for ensuring proper chlorination. The inspections disclosed that in general the water in the pools is being maintained at the proper standard of purity.

The supervision of houses in multiple occupation continues to take up much time, but it must be reported that there is a considerable improvement in conditions at such houses. There can be no doubt that the practice of applying the provisions of Housing Act 1961, which enables the local authority to limit the number of occupants of houses in multiple occupation to suit the amenities provided, has played a great part in securing this improvement.

The following is a statistical report of the work carried out by the Public Health Inspectors' section of the department during 1968.

Complaints

No. received	Notices Served		Prosecution
	Informal	Formal	
2,340	541	61	0
	Verbal		
	498		

Food & Drugs

Complaints re Food		Prosecutions	
37		25	
Sampling			
	Samples Taken	Result	
General Food - Chemical	314 Informal	28	Unsatisfactory
Analysis	23 Formal	4	Unsatisfactory
Special samples - 11 (submitted following food complaints).			
Milk			
Phosphatase	75	Satisfactory	
Turbidity	2	"	
Methylene Blue	73	"	
Brucella Abortus	Nil (No untreated milk sold).		
Test for Antibiotics	176		
Ice Cream	253	Grade I	90
		" II	45
		" III	54
		" IV	64
Shellfish	328	Satisfactory	314
Liquid Egg	6	Satisfactory	

Food Hygiene (General) Regulations, 1960

Number of premises to which the Regulations apply:

Greengrocers	127
Butchers	112
Grocers	249
Confectioners	217



Fishmongers	61
Bakers & Flour Confectioners	67
Cafes	297
Licensed Premises	128
Ice Cream Manufacturers	6
Hotels & Boarding Houses	221
Canteens	104
Dairies	4
Miscellaneous	<u>74</u>
Total	<u>1,667</u>

All the premises comply with Regulation 16, requiring the provision of washbasins, and Regulation 19, requiring the provision of sinks, is complied with in the 1,652 premises to which it applies.

### Food Inspection

Over 11 tons of imported food was inspected at the Airport during the year and all was found to be satisfactory: 7½ tons of miscellaneous foodstuffs were surrendered by food retailers as being unfit for human consumption.

### Liquid Egg (Pasteurisation) Regulations, 1963

1. Number of egg pasteurisation plants in the district	0
2. Number of samples of liquid egg submitted to the Alpha - Amylase Test,	6
Number unsatisfactory	0

### Poultry Inspection

Number of poultry processing premises within the district	Nil
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### Regulations and Licensing

#### Milk & Dairies (General) Regulations, 1959

Distributors of Milk	215
Dairies	3

#### Milk (Special Designation) Regulations, 1963 - 1965

Dealers Untreated Milk Licences	1
Dealers Pasteurisers Licences	2
Pre-packed Milk Licences	246

#### Food & Drugs Act, 1955, Section 16

Registration for sale, manufacture or storage of ice cream	483
Preparation of sausages or potted pressed pickled or preserved food	155

### Southend-on-Sea Corporation Act, 1947

Premises registered for sale of Shellfish	26
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**Caravan Sites & Control of Development Act, 1960**

Site Licensed	1
---------------	---

**Rag, Flock and Other Filling Materials Act, 1951**

Premises Registered	8
Number of samples analysed	5

**Pet Animals Act, 1951**

Premises Registered	22
---------------------	----

**Riding Establishments Act, 1964**

Premises Registered	1
---------------------	---

**Animal Boarding Establishments Act, 1963**

Premises Registered	3
---------------------	---

**Diseases of Animals (Waste Food) Order, 1957**

Premises Licensed	2
-------------------	---

**Pharmacy & Poisons Act, 1933**

Persons Registered	147
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**Inspections Carried Out**

	No. of Visits	Defects Found	Notices Served
Food Premises	6,210	117	90
Shellfish Dealers	506	2	2
Food Inspection at Airport	63	-	-
Merchandise Marks Act, 1926	207	6	5
Pharmacy & Poisons Act, 1933	37		
Offices, Shops & Railway Premises Act, 1963	1,591	301	146
Dirty & Verminous Premises	228	-	-
Caravan Sites & Control of Development Act 1960	53	-	-
Rodent Control	1,773	487	-
Pet Animals Act, 1951	81	-	-
Clean Air Act, 1956	600	-	-
Diseases of Animals Act, 1950	49	-	-
Diseases of Animals (Waste Food) Order 1957	3		
Houses in Multiple Occupation	1,681	5	1
Factories	435	18	13
Outworkers	80		
Infectious Disease Control	388		
Noise Abatement Act, 1960	430	-	-
Places of Public Entertainment	2	-	-
Prevention of Damage by Pests Act, 1949	396	3	2
Rehousing Enquiries	141	-	-
Riding Establishments	4	-	-
Schools (Sanitary accommodation)	33	-	-
Swimming Pools	88	-	-

**Housing**

**Houses in Multiple Occupation**

There are now in the Borough 196 houses which are let as houses in multiple occupation to three or more families. Fifty of these houses are subject to directions made under Section 19 Housing Act, 1961 which limit the number of persons who may be accommodated, having regard to the amenities available.

**Unfit Houses**

During the year three houses were the subject of demolition orders and closing orders were made in respect of three dwellings.

**Repair of Houses**

Three hundred and seventy-six houses were made fit during the year following the serving of notices under the Public Health Acts.

**Pest Control**

During the year 487 properties were found to be infested by rodents and the appropriate treatment was carried out. Pigeon Control work was carried out by a contractor using trapping methods and 364 pigeons were taken.

**Fertilizer & Feeding Stuffs Act, 1926**

Ten samples were taken under the above Act and two samples of fertilizers were found not to comply with the legal standard. The matter was taken up with the retailer.

**OUTWORK**

Nature of Work	Work-people
Wearing ) Making etc., apparel ) Cleaning and Washing	53
Furniture and upholstery	10
Brass and brass articles	34
Umbrellas, etc.	1
Artificial flowers	2
Stuffed toys	13
	<hr/> 113 <hr/>



**Prescribed Particulars on the Administration of the Factories Act 1961**

**PART I OF THE ACT**

1 - **INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	14	35	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	438	371	12	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	24	29	1	-
Total	476	435	13	-

2 - Cases in which **DEFECTS** were found

(If defects are discovered at the premises on two, three or more separate occasions they are shown as two, three or more "cases")

Particulars  (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted  (6)
	Found  (2)	Remedied  (3)	Referred  To H.M. Inspector (4)      By H.M. Inspector (5)		
Want of cleanliness (S.1)	4	2	-	-	-
Overcrowding (S.2)			-		-
Unreasonable temperature (S.3)		-	-		-
Inadequate ventilation (S.4)		-	-		-
Ineffective drainage of floors (S.6)	1	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	2	-	-	-	-
(b) Unsuitable or defective	11	11	-	1	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Out-work)	-	-	-	-	-
Total	18	13	-	1	-

Table 1.

VITAL STATISTICS 1968

		Totals	Rates per 1,000 Popu- lation	Rates per cent of Live Births	Rates per 1,000 Live Births	Rates per 1,000 Live Related Births	Rates per 1,000 Total Births	England and Wales (Provisional)
Live Births								
Males	1,130	2,188	15.55					16.9
Females	1,058			9.87				
Illegitimate		216						8.4
Stillbirths								
Males	12	35					15.74	14.0
Females	23							
Total Live and Stillbirths								
Males	1,142	2,223						
Females	1,081							
Infant Deaths (under 1 year)								
Males	22	36			16.45			18.0
Females	14					15.72		
Legitimate	31					23.15		
Illegitimate	5							
Neo-natal Deaths (under 4 weeks)								
Males	20	28			12.80			12.3
Females	8							
Early Neo-natal Deaths (under 1 week)								
Males	17	23			10.51			10.5
Females	6							
Peri-natal Mortality (Stillbirths and early neo-natal deaths combined)		58					26.09	25.0
Maternal Mortality		1					0.44	0.24

\* "Adjusted" Rate, i.e. the "crude" rate multiplied by the area comparability factor of 1.18.

Table 2

		Totals	Rates Per 1,000 Population	England and Wales (Provisional)
Deaths				
Males	1,220	2,542	*11.48	11.9
Females	1,322			
Deaths from:				
Whooping Cough		-	-	0.00
Diphtheria		-	-	0.00
Respiratory Tuberculosis		5	0.03	0.03
Other, including late effects		2	0.01	0.01
Influenza		23	0.14	0.10
Acute Poliomyelitis		-	-	0.00
Pneumonia		119	0.72	0.84
Cancer of Lung and Bronchus		135	0.81	0.59
Males	106		1.39	1.01
Females	29		0.32	0.19

\* "Adjusted" Rate i.e. the crude rate multiplied by the area comparability factor of 0.75.

Table 3

EXPENDITURE

Principal Expenditure - Year ended 31st March 1968.

		£	s.	d.
N.H.S.A. Section 22	: Care of Mothers and Young Children	31,453	15	5
1946	23 : Midwifery	25,594	1	1
	24 : Health Visiting	15,971	16	0
	25 : Home Nursing	41,152	5	6
	26 : Vaccination and Immunisation	4,501	18	8
	27 : Ambulance Service	67,604	15	8
	28 : Prevention of Illness, Care and After-care	16,336	18	1
	29 : Domestic Help	83,103	11	11
	51 : Mental Health	54,849	1	6
	Other Health Services	111	9	6
Income from these Services:		14,464	7	0

		£	s.	d.
Public Health Acts	General Sanitary Expenses	38,145	9	2
	Disinfecting	2,121	13	4
	Mortuary	1,707	4	6
	Rodent Control	1,027	14	6
	Health General	4,871	9	5
Income from these Services:		250	12	11



National Assistance Act, 1948	Residential Accommodation:	£	s.	d.
	Corporation Homes	338,380	8.	2
	Provided outside Southend	8,039	6.	8
	Provided by Voluntary Organisations	68,918	13.	2
	Other Welfare Services	18,331	14	2
	Income from these Services	181,737	19	2

Table 4

CHILD WELFARE CLINICS

	Southend	Southchurch	Leigh	Westcliff	Shoebury	Thorpedene	Kent Elms	Blenheim	Manners Way	Earls Hall	North Avenue	TOTAL
No. of sessions	102	101	101	101	29	100	102	26	23	29	51	765
No. attending												
Born in 1968	307	272	234	372	56	190	292	25	19	51	88	1906
Born in 1967	222	197	185	200	33	149	199	30	24	63	71	1373
Born in 1963 - 1966	156	121	108	115	29	99	130		8	19	23	808
Total attendances												
Born in 1968	2087	2136	1538	2707	331	1265	2253	232	233	493	808	14083
Born in 1967	1083	1398	1209	1642	166	848	1345	206	242	309	435	8883
Born 1963 - 1966	483	398	284	328	91	389	401	23	20	55	105	2577
No. aged 1 to 5 (routine medical Inspections)	232	383	221	213	†	†	†	†	†	†	†	1103

† Medical Officer does not attend these clinics

Table 5

Welfare and Other Foods Distributed

	National Dried Milk tins	Cod Liver Oil bottles	Vitamins A and D packets	Orange Juice bottles
1965	26,141	2,940	2,921	45,053
1966	24,486	2,783	2,757	45,139
1967	21,007	2,527	2,338	42,660
1968	16,075	2,232	2,036	40,401

Table 6

Ante-Natal Clinics

	M.H.C.	Leigh	Kent Elms	Westcliff	Thorpedene	Total
No. of sessions	157	29	24	104	52	366
No. of individual expectant mothers	1091	248	281	613	233	2466
Total attendances	5072	930	1042	2479	1074	10597

Table 7

Ante-Natal Haemoglobin Estimations during 1968 - 2055 tests

Haemoglobin Gms. %	Under 7.5	7.5 - 8.1	8.2 - 8.9	9.0 - 9.6	9.7 - 10.4	10.5 - 11.2	11.3 - 12.0	12.1 - 12.6	12.7 - 13.3	13.4 - 14.1	14.2 - 14.8	14.9 +
% Haemoglobin 14.8 average	Under 51	51-55	56-60	61-65	66-70	71-75	76-80	81-85	86-90	91-95	96-100	100+
No. of tests	3	3	8	66	182	456	781	282	185	80	9	-
% of each group	0.14	0.14	0.39	3.2	8.9	22.2	38.0	13.7	9.0	3.9	0.43	-

Table 8

Precipitation Reaction Tests		Rhesus Factor Tests		
No. of tests made	P.P.R. Negative	No. of tests made	Rh. Positive	Rh. Negative
2118	2118	2174	1597	577

Table 9

Post-Natal Clinics

	M.H.C.	Leigh	Kent Elms	Westcliff	Thorpedene	Total
No. of sessions held	38	29	24	104	52	247
No. of individual mothers who attended	462	86	114	190	79	931
Total attendances	579	100	139	210	99	1127

Table 10

Relaxation Classes

No. of sessions	254
No. of expectant mothers who attended	514
Total attendances	3011

Table 11

Dental Treatment of Expectant and Nursing Mothers and Young Children  
No. Provided with Dental Care

	Number Examined	Number who commenced Treatment	Courses of Treatment Completed
Expectant and nursing mothers	35	35	35
Children under five	76	76	69

Forms of Dental Treatment Provided

	Scalings and Gum Treatment	Fillings	Extractions	General Anaesthetics	Patients provided with Dentures	
					Full Upper or Lower	Partial Upper or Lower
Expectant and nursing mothers	27	60	58	16	-	4
Children under five	-	30	122	55	-	-

Table 12

Stillbirths		Infant Deaths	
Congenital defect	12	Prematurity	14
I.U.D.	10	Congenital Defect	10
Pre eclamptic toxæmia	3	Asphyxia of the Newborn	2
Accidental Haem.	2	Respiratory Infection	1
Placenta Praevia	1	"Cot Deaths"	3
Placental Insufficiency	1	Birth injuries	3
Birth Hazards	3	Asphyxia (open verdict)	1
Dysmaturity	1	Others (endomyo-cardial fibro elastosis and neonatal volvulus of small intestine	2
Rhesus incompatibility	1		
Unclassified	1		

Table 13

Deaths under 1 Year by Age Groups

	M	F	Total
Under 24 hours	10	3	13
24 hours - 1 week	7	3	10
Total deaths under 1 week	17	6	23
1 - 2 weeks	2	-	2
2 - 4 weeks	1	2	3
Total neo-natal mortality	20	8	28
1 - 3 months	-	4	4
3 - 6 months	1	1	2
6 - 9 months	1	1	2
9 - 12 months	-	-	-
Total infant mortality	22	14	36



Table 14  
Peri-natal Mortality

Year	No. of stillbirths	No. of infants dying aged up to and including seven days	Total	Total live and stillbirths	Rate per 1,000 live and stillbirths
1968	35	23	58	2,223	26.1
1967	28	30	58	2,302	25.2
1966	37	25	62	2,427	25.6
1965	42	31	73	2,463	29.6
1964	34	31	65	2,485	26.2
1963	38	27	65	2,510	25.9
1962	27	29	56	2,421	23.1
1961	36	25	61	2,346	26.0
1960	26	26	52	2,250	23.1
1959	36	18	54	2,144	25.2

Table 15

Death of Children between Ages 1 to 5 years			
Male		Female	
18 months	Acute tracheo-bronchitis	15 months	Gastro enteritis
2 years	Late complications of meningitis		
3 years	Broncho pneumonia in child with congenital disease		
4 years	Road accident		

Table 16

Deaths of Children aged 5 - 15 years			
Male		Female	
5 years	Pneumonia in mentally subnormal boy	5 years	Chicken pox encephalomyelitis
6 years	Ruptured cerebral aneurism	11 years	Aplastic anaemia
8 years	Peritonitis	14 years	Leukaemia
10 years	Drowning		
11 years	Cancer.		

Table 17

PREMATURE BIRTHS 1968

Weight at Birth	Premature Live Births												Premature Stillbirths	
	Born in Hospital				Born at home or in a nursing home				Transferred to hospital on or before the 28th day				Born in hospital	Born at home or in nursing home
	Total births	Died within 24 hrs. of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hrs. of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hrs. of birth	Died in 1 and under 7 days	Died in 7 and under 28 days		
2lb. 3oz. or less	9	4	.	3	.	.	.	.	.	.	.	.	4	.
Over 2lb. 3 oz. up to and including 3lb. 4 oz.	7	3	3	.	1	.	.	.	1	1	.	.	7	.
Over 3lb. 4 oz. up to and including 4lb. 6 oz.	24	.	.	.	3	.	.	.	2	.	.	.	7	.
Over 4lb. 6 oz. up to and including 4lb. 15 oz.	32	1	.	1	1	.	.	.	1	.	.	.	2	.
Over 4lb. 15 oz. up to and including 5lb. 8 oz.	58	2	.	.	3	.	.	.	.	.	.	.	3	.
TOTALS	130	10	3	4	8	.	.	.	4	1	.	.	23	.

Table 18  
Midwives Clinics

	M.H.C.	Leigh	Westcliff	Thorpedene	Kent Elms	Total
No. of sessions held	51	50	50	29	51	231
No. of individual expectant mothers who attended	189	68	129	59	216	661
Total attendances	979	280	526	191	895	2871

Table 19  
Congenital Malformations

Year	Notifications received	Notifications returned to G.R.O.	Rate per 1000 births (live and still)
1964	51	36	14.5
1965	67	32	13.0
1966	59	25	10.3
1967	72	35	15.2
1968	43	26	11.9

Table 20

Cases visited by Health Visitors		No. of Cases
1	Total number of cases	11,588
2	Children born in 1968	2,475
3	Children born in 1967	2,967
4	Children born in 1963 - 66	4,363
5	Total number of children in lines 2 - 4	9,805
6	Persons aged 65 or over	44
7	Number included in line 6 who were visited at the special request of a G.P. or hospital	-
8	Mentally disordered persons	11
9	Number included in line 8 who were visited at the special request of a G.P. or hospital	1
10	Persons excluding Maternity Cases, discharged from hospital (other than mental hospitals)	10
11	Number included in line 10 who were visited at the special request of a G.P. or hospital	10
12	Number of tuberculous households visited	11
13	Number of households visited on account of other infectious diseases	90
14	Other cases	1,622
15	Number of tuberculous households visited by tuberculosis visitor	142
16	Total number of visits made by health visitors	20,016



**Table 21**

**Home Nursing Service**

Year	Age at time of first visit during the year			
	Over 65		Under 5	
	No.	Visits paid	No.	Visits paid
1964	2,668	68,787	47	256
1965	2,478	71,969	44	312
1966	2,791	74,480	24	123
1967	2,792	75,428	29	111
1968	2,970	75,565	16	73

**Table 22**

**Home Nursing**

Classification of Conditions treated	No. of Patients Visited					
	1949	1964	1965	1966	1967	1968
Accidents	23	4	2	2	5	6
Amputations	6	-	1	-	3	1
Blood Diseases	32	495	471	497	602	658
Bronchitis and Pleurisy	81	252	293	324	321	386
Burns and Scalds	20	18	26	26	25	19
Carbuncles,Boils & Abscesses	44	110	84	76	40	22
Cardiac & Circulatory Conditions	200	442	379	429	400	494
Cerebral Haemorrhage	142	228	217	249	289	297
Dental Conditions	-	4	3	-	1	-
Diabetes Mellitus	142	75	76	77	70	76
Ear, Nose and Throat Conditions	88	58	39	31	21	18
Enema (for treatment)	188	422	405	428	381	408
Enema (for investigation)	255	618	504	550	486	561
Eye Conditions	13	6	9	12	12	15
Fractures	27	7	8	7	8	16
Gangrene	9	3	10	4	7	2
Gastric Conditions	19	1	3	1	4	6
Gynaecological Conditions	45	25	20	21	26	23
Helminth Infections	55	3	-	-	-	-
Infectious Diseases	5	1	-	-	-	-
Influenza	11	1	-	7	2	7
Injections (for unclassified causes)	20	23	7	4	3	3
Maternity	7	117	77	65	37	5
Miscarriage	13	4	4	2	6	2
Malignant Diseases	167	195	209	275	286	189
Nervous Diseases	2	40	35	39	45	65
Operations	8	3	1	-	1	-
Paralysis (other than strokes)	37	43	34	32	40	5
Pneumonia	90	54	44	30	41	35
Prostatic Conditions	66	7	12	6	6	8
Pyrexia of Unknown Origin	-	2	1	1	1	-
Rheumatic Diseases	62	188	197	228	243	130
Senility	135	278	300	346	343	291
Skin Conditions	26	56	35	23	43	30
Surgical Dressings	92	297	303	344	364	394
Tuberculosis	22	58	57	50	50	27
Urinary and Renal Conditions	3	44	37	25	37	221
Ulceration of Legs	36	114	120	132	140	186
Not classified	8	21	6	5	4	2
Total patients	2,199	4,317	4,029	4,348	4,393	4,408
Total visits	56,897	98,862	96,846	99,102	99,758	111,880
Total of whole-time and equivalent whole-time staff at end of year	14.5	28	28	27	27	27.2

Table 23

Smallpox Vaccination - aged under 15

At Council's Clinics:		By Private Practitioners:	
Primary	526	Primary	863
Re-vaccination	19	Re-vaccination	129

Table 24

Diphtheria, Whooping Cough, Tetanus and Poliomyelitis

	Diphtheria	Whooping Cough	Tetanus	Poliomyelitis
Completed Primary Courses				
1) At Council's Clinics				
Children under 4	765	745	765	1027
Children 4 - 16	53	20	63	76
Totals	818	765	828	1103
2) By Private Practitioners				
Children under 4	828	804	832	846
Children 4 - 16	105	44	263	75
Totals	933	848	1095	921
Reinforcing Doses				
1) At Council's Clinics				
Children under 4	51	7	51	6
Children 4 - 16	648	15	648	848
Totals	699	22	699	854
2) By Private Practitioners				
Children under 4	362	309	372	302
Children 4 - 16	659	315	775	643
Totals	1021	624	1147	945

Table 25

Cholera	28	Tetanus	7
Typhoid	8	Yellow Fever	286
Cholera/Typhoid	278	Typhoid/Tetanus	9

AMBULANCE SERVICE

Table 26

	Mileage		Patients Carried		Miles per Patient	
	1968	1967	1968	1967	1968	1967
St. John Ambulance Brigade	122,798	117,538	17,858	17,373	6.87	6.77
Sitting-case Ambulances	26,028	25,976	16,583	16,085	1.57	1.61
Hospital Car Service	260,376	247,586	47,314	46,322	5.50	5.34
Corporation Car Pool	103,121	90,727	18,361	17,178	5.62	5.28
Totals	512,323	481,827	100,116	96,958	5.12	4.97
Transport by Rail	26,471	33,547	646	836	40.97	40.13

Table 27

Proportionate comparison, 1960 and 1968

	Miles		Patients	
	1960 %	1968 %	1960 %	1968 %
St. John Ambulance Brigade	28	24	19	18
Corporation Lift Ambulances	9	5	21	17
Hospital Car Service	59	51	59	47
Corporation Car Pool	4	20	1	18

Table 28

Analysis of Journeys - All Services

Journey	Patients Carried		Increase	Decrease
	1968	1967		
London Hospitals	350	340	10	
Limb Fitting Centre, Roehampton	256	380		124
Limb Fitting Centre, Gillingham	622	320	302	
Limb Fitting Centre, Cambridge	81	102		21
Runwell Hospital	6037	4666	1371	
Rochford General Hospital	21532	21696		164
Other Hospitals outside the Borough	166	294		128
Convalescent Homes outside the Borough	79	44	35	
Misc. transfers outside the Borough	95	121		26
Southend General Hospital	62395	61032	1363	
Occupational Therapy Dept., Westcliff	2130	1234	896	
Westcliff Hospital	1894	1855	39	
Lancaster House	671	643	28	
Local railway stations	657	830		173
Miscellaneous local journeys	3151	3401		250
	100116	96958	4044	886
			886	
			3158	



Table 29

Analysis of Journeys - St. John Ambulance Brigade

Journey	Patients Carried		Increase	Decrease
	1968	1967		
London Hospitals	105	86	19	
Limb Fitting Centre, Roehampton		27		27
Limb Fitting Centre, Gillingham	4	4		
Limb Fitting Centre, Cambridge		2		2
Runwell Hospital	108	91	17	
Rochford General Hospital	4877	4794	83	
Other Hospitals outside the Borough	33	15	18	
Convalescent Homes outside the Borough	29	4	25	
Misc. transfers outside the Borough	37	47		10
Southend General Hospital	7900	7420	480	
Westcliff Hospital	1343	1129	214	
Lancaster House	165	201		36
Local Railway Stations	174	218		44
Misc. local journeys	3083	3335		252
	<u>17858</u>	<u>17373</u>	<u>856</u>	<u>371</u>
			<u>371</u>	
			<u>485</u>	

Table 30

Analysis of Journeys - Hospital Car Service

Journey	Patients Carried		Increase	Decrease
	1968	1967		
London Hospitals	240	246		6
Limb Fitting Centre, Roehampton	256	333		77
Limb Fitting Centre, Gillingham	610	316	294	
Limb Fitting Centre, Cambridge	81	100		19
Runwell Hospital	366	317	49	
Rochford General Hospital	3969	4159		190
Other Hospitals outside the Borough	108	254		146
Convalescent Homes outside the Borough	50	40	10	
Misc. transfers outside the Borough	50	62		12
Southend General Hospital	37901	37462	439	
Occupational Therapy Dept., Westcliff	2104	1234	870	
Westcliff Hospital	550	723		173
Lancaster House	501	424	77	
Local Railway Stations	471	596		125
Misc. local journeys	<u>57</u>	<u>56</u>	<u>1</u>	
	<u>47314</u>	<u>46322</u>	<u>1740</u>	<u>748</u>
			<u>748</u>	
			<u>992</u>	

**Table 31**

**Analysis of Journeys - Corporation Car Pool**

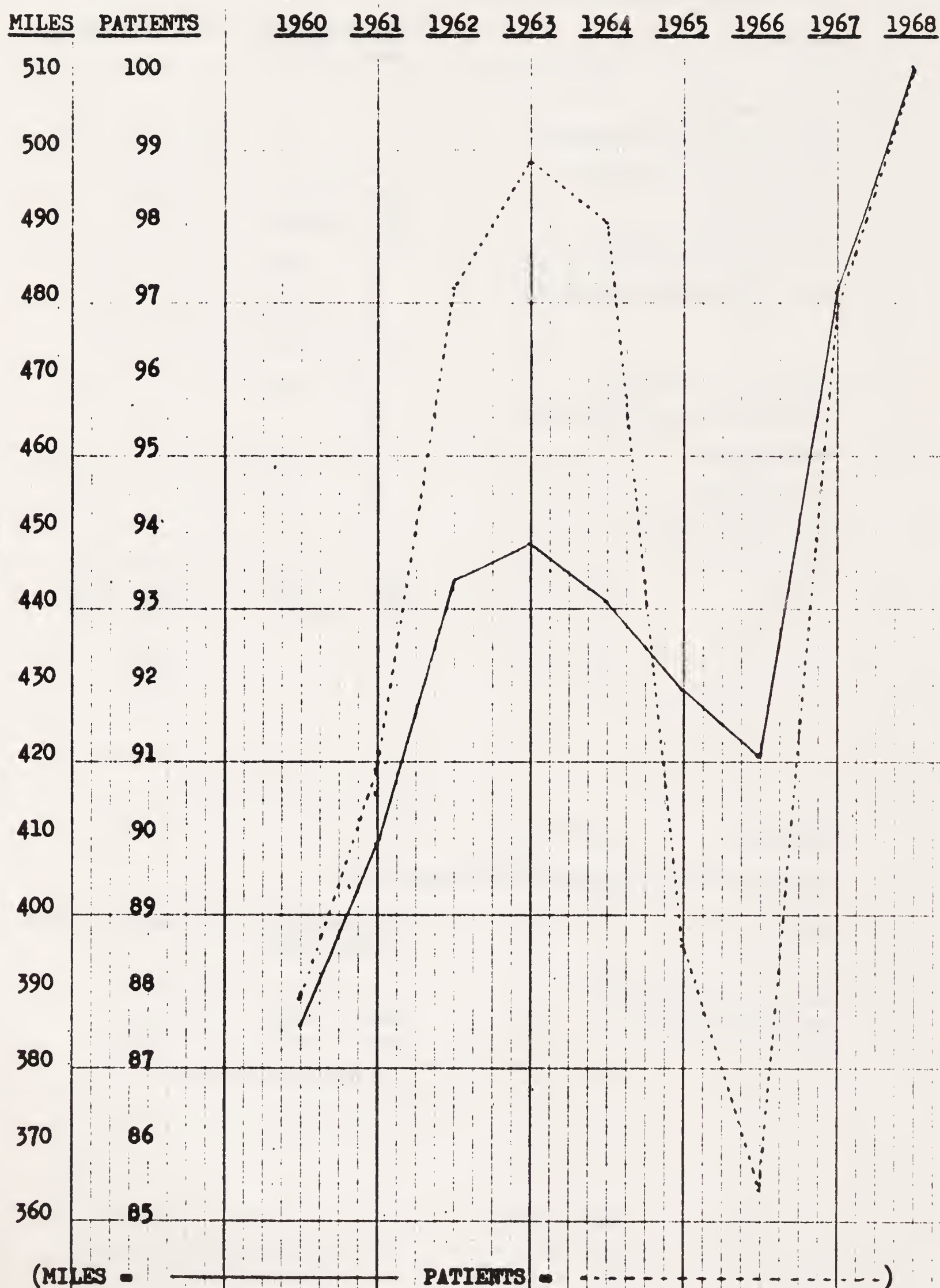
Journey	Patients Carried		Increase	Decrease
	1968	1967		
London Hospitals	5	8		3
Limb Fitting Centre, Roehampton		20		20
Limb Fitting Centre, Gillingham	8		8	
Runwell Hospital	5563	4258	1305	
Rochford General Hospital	12686	12743		57
Other Hospitals outside the Borough	25	25		
Misc. transfers outside the Borough	8	12		4
Southend General Hospital	11	65		54
Occupational Therapy Dept. Westcliff	26		26	
Westcliff Hospital	1	3		2
Lancaster House	5	18		13
Local Railway Stations	12	16		4
Misc. local journeys	11	10	1	
	<u>18361</u>	<u>17178</u>	<u>1340</u>	<u>157</u>
			<u>157</u>	
			<u>1183</u>	

**Table 32**

**Analysis of Journeys - Corporation Lift Ambulances (2)**

Journey	Patients Carried		Increase	Decrease
	1968	1967		
Southend General Hospital and other local clinics	<u>16583</u>	<u>16085</u>	<u>498</u>	

**Table 33**  
**THOUSANDS**





**Table 34**  
**Tuberculin Skin testing and B.C.G. Vaccination**

	Acceptance Rate	Percentage Previously Vaccinated	Natural Positive Rate %	Conversion Rate %
1st Year	91.5 (92.6)	6.40 (7.53)	1.56 (2.51)	0.13 (0.32) 0.35 (0.34)
2nd Year	94.3 (92.6)	7.26 (7.36)	2.98 (3.16)	
3rd Year	93.4 (92.5)	7.71 (6.53)	3.65 (3.92)	

The figures in brackets are those for the previous year

**Table 35**  
**Heaf Reactions of Unvaccinated Secondary School Pupils**

	Grade of Reaction to Heaf test				Total
	1	2	3	4	
1st Year	18 (27)	3 (2)	2 (1)	2 (4)	25 (34)
2nd Year	3 (7)	1 (1)	1 (0)	0 (0)	5 (8)
3rd Year	7 (6)	1 (3)	0 (0)	1 (1)	9 (10)
TOTAL	28 (40)	5 (6)	3 (1)	3 (5)	39 (52)

The figures in brackets are those for the previous year

**Table 36**  
**Summary - All Schools**

Total No.	First Year Pupils	Second Year Pupils	Third Year Pupils	Private Schools	Total
Invited	2217	2204	2412	75	6908
Consented	2028	2079	2254	57	6418
Tested	1783	1765	2103	50	5701
Negative	1650	1658	1894	39	5241
Natural Positive	25	5	9	3	42
Prior vaccination	-	-	140	3	143
Converters	-	2	6	-	8
B.C.G. given	-	-	1834	39	1873

Table 37

No. of patients referred to Local Health Authority during year ended 31.12.68

Note: The following table is an extract from Form SBL.627 (Department of Health and Social Security).  
"As from 1st January 1968, ' referral ' is limited to persons who are referred to the authority for the provision of services, whether centre or hostel, by means of home visits or otherwise. Referrals made for the purpose of obtaining admission to hospital should not be counted."

Referred by	Mentally Ill				Psychopath				Totals				Grand Total
	Under Age 16		16 and over		Under Age 16		16 and over		Under Age 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	
General Practitioners	1	-	32	41	-	-	-	-	1	-	32	41	74
Hospitals on discharge from in-patient treatment	-	-	12	21	-	-	-	-	-	-	12	21	33
Police and Courts	-	-	8	16	-	-	-	-	-	-	8	16	24
Hospitals, during or after out-patient or day treatment	-	-	4	10	-	-	-	-	-	-	4	10	14
Other Sources	-	-	38	46	-	-	-	-	-	-	38	46	84
Totals	1	-	94	134	-	-	-	-	1	-	94	134	229

No. of patients under Community Care of Local Authority at home on 31.12.67 : 83  
No. of patients under Community Care of Local Authority at home on 31.12.68 : 89

Table 38

Admission to Hospital

Category	Informal		Section 29		Section 25		Section 26		Totals	
	M	F	M	F	M	F	M	F	M	F
Mental Illness	75	95	34	59	28	70	10	23	147	247
Psychopathic	1	-	-	1	1	-	-	-	2	1
Totals	76	95	34	60	29	70	10	23	149	248
1968	171		94		99		33		397	
1967	181		84		99		18		382	
1966	190		154		42		24		410	
1965	211		90		65		21		387	
1964	211		91		58		28		388	

Age Groups on Admission

	Under 21	21 - 30	31 - 40	41 - 50	51 - 60	61 - 70	71 and over	Totals
Male	2	32	33	35	21	8	18	149
Female	4	40	27	49	41	44	43	248
Totals 1968	6	72	60	84	62	52	61	397
Totals 1967	19	49	84	61	59	46	64	382

Table 39

No. of patients referred to Local Health Authority during 1968

Referred by	Subnormal				Severely Subnormal				Totals
	Under Age 16		16 and over		Under Age 16		16 and over		
	M	F	M	F	M	F	M	F	
General Practitioners	-	-	-	-	-	-	-	-	-
Hospital on discharge from in-patient treatment	-	-	-	-	-	1	-	-	1
Hospital after or during out-patient treatment	-	-	-	-	-	-	-	-	-
Local Education Authority 57(4)	-	-	-	1	-	-	-	-	1
Police and Courts	-	-	-	-	-	-	-	-	-
Relatives	-	-	-	-	-	-	-	-	-
Transfers in from other Local Authorities	-	-	-	-	-	-	-	-	-
On leaving special school	-	-	-	-	-	-	-	-	-
Other sources	-	-	1	4	1	1	-	-	7
TOTALS	-	-	1	5	1	2	-	-	9

Table 40

Total Cases on Authority's Register at 31.12.68 and disposal

	Subnormal				Severely Subnormal				Totals
	Under Age 16		16 and over		Under Age 16		16 and over		
	M	F	M	F	M	F	M	F	
Attending Day Training Centre	8	1	3	6	28	27	13	25	111
Resident in Res. Training Centre	-	-	-	-	-	-	-	-	-
Receiving Home Training	-	-	-	-	-	-	-	-	-
Resident in L/A Home or Hostel	-	1	5	5	-	1	-	1	13
Resident in other Res. Homes/ Hostels	-	-	-	5	1	1	2	3	12
Boarded out in private household	-	-	-	-	-	-	-	-	-
Resident in their own homes (not attending Day Centre)	3	-	86	145	7	1	23	22	287
Total on Register at 31.12.68	11	2	94	161	36	30	38	51	423

Table 41

Age Groups in Community: Subnormal and Severely Subnormal at 31.12.1968

	-16		16 - 20		21 - 30		31 - 40		41 - 50		51 - 64		65 and over		Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
S.N.	11	1	13	26	36	42	19	24	12	22	9	25	1	11	252
S.S.N.	35	28	5	18	9	14	10	5	7	7	4	3	.	1	146
Total 1968	46	29	18	44	45	56	29	29	19	29	13	28	1	12	398
Total 1967	41	30	16	39	48	58	30	31	16	29	13	28	.	12	391



Table 42

Infectious Diseases

Scarlet Fever	58
Whooping Cough	84
Measles	444
Dysentery	11
Food Poisoning	48
Respiratory Tuberculosis	25
Non-respiratory Tuberculosis	7
Ophthalmia neonatorum	8
Infectious hepatitis	50
Acute encephalitis	1

Table 43

Tuberculosis Notifications and Deaths

Age Group	Males								Females							
	Respiratory				Non-Respiratory				Respiratory				Non-Respiratory			
	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths
0	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
1	.	.	.	.	.	.	.	.	1	.	1	.	.	.	.	.
5	2	1	3	.	.	.	.	.	2	.	2	.	.	.	.	.
15	.	.	.	.	.	.	.	.	1	1	2	.	1	.	1	.
25	.	.	.	.	1	.	1	.	1	.	1	.	.	.	.	.
35	1	5	6	.	.	.	.	.	1	.	1	.	1	.	1	.
45	4	1	5	.	.	.	.	.	.	1	1	1	.	.	.	.
55	1	2	3	.	.	.	.	.	.	2	2	.	2	.	2	.
65	2	3	5	2	1	.	1	.	3	.	3	1	1	.	1	.
75	3	.	3	.	.	.	.	.	*4	.	*4	2	.	.	.	1
Totals	13	12	25	2	2	-	2	-	*13	4	*17	4	5	-	5	1

\* Including two posthumous notifications

Table 44

Respiratory Tuberculosis

Primary Notifications Classified According to Age Groups

Age Groups	1961		1962		1963		1964		1965		1966		1967		1968	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
0	.	.	.	.	.	1	.	.	.	.	.	.	1	.	.	.
1	1	.	1	.	2	.	.	3	.	.	1	1	.	.	.	1
5	1	1	1	3	1	4	3	1	1	.	2	2	2	2	2	2
15	3	7	4	5	7	6	3	3	3	3	3	1	2	1	.	1
25	7	4	4	3	4	3	3	3	1	2	1	3	5	.	.	1
35	2	4	8	2	5	5	3	3	2	6	2	2	2	2	1	1
45	7	4	8	2	6	4	4	1	9	1	4	1	3	.	4	.
55	6	1	11	2	5	.	6	.	6	1	4	.	4	1	1	.
65	7	1	.	2	7	1	3	1	7	1	5	1	3	1	2	3
75	1	.	2	2	2	2	.	1	2	2	3	3	1	.	3	4
Totals	34	22	39	21	39	26	25	16	31	16	25	14	23	7	13	13
	56		60		65		41		47		39		30		26	

Table 45

Work of the Chest Clinic 1968

	Respiratory				Non-Respiratory				Totals				Grand Totals
	Adults		Children		Adults		Children		Adults		Children		
	M	F	M	F	M	F	M	F	M	F	M	F	
No. of notified cases on clinic register at 1st January	386	253	8	21	13	52	6	1	399	305	14	22	740
Transfers from clinics outside area during year	11	4	1	-	-	-	-	-	11	4	1	-	16
Children transferred to adult register during year		2	-	-	-	-	-	-	-	2	-	-	2
No. of new cases diagnosed during year:													
T.B. negative	1	2	2	3	-	2	-	-	1	4	2	3	10
T.B. positive	10	8	-	-	2	3	-	-	12	11	-	-	23
Totals	408	269	11	24	15	57	6	1	423	326	17	25	791
No. of cases written off clinic register during the year:													
Recovered	19	10	-	1	-	4	-	-	19	14	-	1	34
Died (all causes)	11	4	-	-	1	2	-	-	12	6	-	-	18
Removed to other clinic areas	11	9	3	3	-	1	1	-	11	10	4	3	28
Children transferred to adult register	-	-	-	2	-	-	-	-	-	-	-	2	2
Other reasons	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	41	23	3	6	1	7	1	-	42	30	4	6	82
No. of notified cases on clinic register at 31st December	367	246	8	18	14	50	5	1	381	296	13	19	709
No. of above known to have had positive sputum during year	-	-	-	-	-	-	-	-	16	8	-	-	24
No. of persons (excluding transfers) first examined during the year	-	-	-	-	-	-	-	-	899	788	146	100	1933
No. of those who attended as contacts and who were diagnosed as:													
Tuberculous	-	-	-	-	-	-	-	-	1	1	2	-	4
Not tuberculous	-	-	-	-	-	-	-	-	58	77	40	25	200
Not determined as at 31st December	-	-	-	-	-	-	-	-	-	-	-	-	-

Table 46

Cases on Register at 31st December

Year	Respiratory				Non-Respiratory				Totals				Grand Totals
	Adults		Children		Adults		Children		Adults		Children		
	M	F	M	F	M	F	M	F	M	F	M	F	
1968	367	246	8	18	14	50	5	1	381	296	13	19	709
1967	386	253	8	21	13	52	6	1	399	305	14	22	740
1966	400	280	5	20	9	54	5	1	409	334	10	21	774
1965	403	278	5	17	7	51	5	-	410	329	10	17	776
1964	396	283	6	21	6	51	6	-	402	334	12	21	769
1963	397	283	6	23	5	44	6	-	402	327	12	23	764
1962	394	284	5	20	5	41	6	-	399	325	11	20	755
1961	397	295	8	22	5	39	7	1	402	334	15	23	774
1960	389	303	10	27	7	44	10	2	396	347	20	29	792
1959	390	301	10	26	10	46	10	3	400	347	20	29	796

Table 47

PUBLIC HEALTH (AIRCRAFT) REGULATIONS 1966  
ALIENS ORDER 1953  
COMMONWEALTH IMMIGRANTS ACT 1962 & 1968

The following table of customs movements of aircraft and passengers is reproduced by courtesy of the Airport Commandant:-

	Movements		Passengers	
	In	Out	In	Out
January	408	413	4789	4344
February	413	406	4550	4944
March	513	503	6296	6679
April	1006	974	25510	27143
May	1035	979	25557	31902
June	1174	1169	33696	34877
July	1217	1219	36860	41053
August	1212	1228	42514	41782
September	1075	1077	34300	26685
October	650	640	11882	8943
November	449	470	4707	4495
December	410	409	5969	7844
	9562	9487	236630	240691

Table 48

MEDICAL REPORTS

Department	Medical Questionnaires	Medical Examinations	Sick Pay Reports
Airport	7	3	5
Architect's	10	-	-
Catering	75	-	-
Cemeteries	1	1	-
Children's	11	-	-
Cleansing	24	7	81
Education	679	27	8
Candidates for Teachers' Training Colleges	-	196	-
Engineer's	97	8	46
Entertainments	2	-	-
Fire	3	14	-
Housing	2	-	1
Justices' Clerk's	9	-	-
Libraries	27	1	1
Parks	87	1	27
Pier and Foreshore	22	4	8
Police (civilian)	12	-	-
Public Health	40	15	7
Town Clerk's	13	4	4
Transport	262	6	21
Treasurer's	22	-	-
Weights and Measures	2	-	-
Other Local Authorities	-	4	-



## **NATIONAL ASSISTANCE ACT, 1948**

I am indebted to Mr.K.G. Golding, M.I.S.W., Principal Welfare Officer, for the information contained in the following reports:-

### **Welfare Services**

The Welfare Section of the Health Department continued to be responsible for general welfare, mental health field work and community care and the Home Help Service. This unified service continued to operate effectively and economically.

As was foreshadowed in last year's Annual Report, the Seebohm Committee which was appointed in December, 1965 to review the local authority personal Social Services in England and Wales, published its Report in July, 1968. The Report recommended the setting up within local authorities of unified Social Service departments on a family welfare basis; this will be the subject of future legislation.

Coming back to Welfare in the County Borough, September 1968 provided a perfect opportunity for a demonstration of welfare in action.

This was the time when several areas of the town were flooded and it was necessary during the course of several days for the Council's Old People's Homes to be used variously as Reception Centre, Food kitchen, and temporary accommodation. The Health and Welfare Department combined well with the many other Council Departments and voluntary organisations, notably the W.R.V.S., to cope with the situation.

The services for the blind, partially sighted, for the deaf and for the physically handicapped have continued as in previous years.

### **Part III Accommodation**

At the end of the year there were 836 persons being cared for in accommodation provided under Part III of the National Assistance Act. Of this number 182 were resident in voluntary Homes.

The increasing average age of the residents in the Homes is a trend which continues and there are now more than a third over the age of 85 and 93 over the age of 90.

There has been an expansion of the short term care arrangements which, in recent years, has been a feature of endeavour in this field. There were 122 such provisions as against 57 last year and this is a number which it is hoped will increase in the future.

One wishes to record yet again our thanks to the many voluntary bodies and individuals who do so much for the residents in our care; to Toc H for regular film shows, maintenance of the library, the trolley shop at Roche Close and the many outings and the use of the coach which they organise. The excursions and the entertainment provided by the Hospital Ladies Working Party, the Inner Wheel, as well as the Rochford and Shoebury Branches of the British Legion, are equally helpful. Much is owed to the Ministers of all religious denominations who not only meet the spiritual needs of the residents but associate themselves so closely with the social life of the Homes.

**ACCOMMODATION PROVIDED PURSUANT TO PART III  
NATIONAL ASSISTANCE ACT 1948**

Accommodated in	Persons resident on:										
	5. 7. 1948	31. 12 1959	31. 12 1960	31. 12 1961	31. 12 1962	31. 12 1963	31.12 1964	31. 12 1965	31. 12 1966	31. 12 1967	31.12 1968
Roche Close	213	328	323	291	298	310	316	310	312	305	280
Crowstone House	-	55	58	52	57	60	60	58	59	58	59
Pantile House	-	60	62	58	61	63	60	61	65	61	58
Whittingham House	-	-	-	60	61	62	62	63	62	61	63
Delaware House	-	-	-	19	59	59	60	58	60	60	61
Brook House	-	-	-	-	-	-	-	-	60	60	60
Priory House	-	-	-	-	-	-	-	-	-	59	60
Other Local Authorities Homes	25	17	16	18	17	20	15	13	13	15	13
Voluntary Homes under Section 26	23	105	112	127	137	137	153	172	176	183	182
Totals	261	565	571	625	690	711	726	735	807	862	836

**PERSONS MAINTAINED BY LOCAL AUTHORITY IN PART III  
ACCOMMODATION DURING 1968**

Accommodation Provided in	Resident on 1. 1. 68		Admitted during year		Discharged during year		Died during year		Remaining on 31.12. 68	
	M	F	M	F	M	F	M	F	M	F
HOMES OF LOCAL AUTHORITY										
Roche Close, Rochford	63	242	75	175	59	119	31	66	48	232
Crowstone House, Westcliff	-	58	-	27	-	17	-	9	-	59
Pantile House, Southend-on-Sea	26	35	20	30	12	12	13	16	21	37
Whittingham House, Southend-on-Sea	21	40	14	20	9	12	2	9	24	39
Delaware House, Shoeburyness	20	40	11	24	4	14	7	9	20	41
Brook House, Eastwood	20	40	10	11	8	6	2	5	20	40
Priory House, Southend-on-Sea	13	46	4	15	3	12	1	2	13	47
HOMES OF OTHER LOCAL AUTHORITIES										
Hertfordshire County Council	-	-	-	1	-	-	-	-	-	1
Chester City Council	-	1	-	-	-	-	-	-	-	1
Essex County Council	-	3	-	-	-	-	-	-	-	3
Kesteven County Council	1	-	-	-	-	-	1	-	-	-
Norfolk County Council	-	2	-	-	-	-	-	-	-	2

Continued on next page



Accommodation Provided in	Resident on 1.1.68		Admitted during year		Discharged during year		Died during year		Remaining on 31.12.68	
	M	F	M	F	M	F	M	F	M	F
Cambridgeshire and Isle of Ely County Council	-	1	-	-	-	-	-	-	-	1
Worcester County Council	-	1	-	-	-	-	-	-	-	1
London Borough of Newham	1	-	-	-	-	-	-	-	1	-
London Borough of Havering	-	1	-	-	-	-	-	-	-	1
London Borough of Harrow	-	1	-	-	-	1	-	-	-	-
London Borough of Tower Hamlets	1	-	-	-	1	-	-	-	-	-
London Borough of Haringey	-	1	-	-	-	-	-	-	-	1
County Borough of Bournemouth	-	1	-	-	-	-	-	-	-	1
VOLUNTARY HOMES										
UNDER SECTION 26:										
Homes for Epileptics	1	3	-	1	1	1	-	-	-	3
Homes and Hostels for the Blind	-	15	-	1	-	1	-	2	-	13
Chaltonholme, Westcliff	-	12	-	-	-	1	-	1	-	10
Sandringham, Westcliff	5	16	1	3	1	1	-	1	5	17
Dowsetholme, Southend	-	5	-	1	-	-	-	1	-	5
St. Martin's Westcliff	-	20	-	6	-	1	-	1	-	24
Millfield, Prittlewell	-	7	-	3	-	-	-	1	-	9
Victoria Oppenheim House, Westcliff	4	12	2	7	1	1	1	1	4	17
St. Louise's, Leigh	-	2	-	-	-	-	-	1	-	1
Cripplecraft, Herne Bay	-	1	-	-	-	-	-	-	-	1
Eastwood Lodge, Eastwood	1	5	-	-	-	-	1	1	-	4
Jewish Home & Hospital at Tottenham, London N.15	-	1	-	-	-	-	-	-	-	1
Home for Aged Jews London S.W.12	-	3	-	2	-	-	-	2	-	3
Royal Hospital & Home for Incurables, London S.W.15	-	1	-	-	-	-	-	-	-	1
Nazareth House, Southend	10	22	2	4	2	3	1	3	9	20
Alexandra House, Dovercourt	-	1	1	1	-	-	-	-	1	2
Winsford House, Clacton	-	3	-	-	-	-	-	-	-	3
Cheshire Foundation Home, Cophthorne	-	1	-	-	-	-	-	-	-	1
The Dell Rest Home, Oulton Broad	-	2	-	-	-	-	-	-	-	2
"High Park", Westcliff	-	3	-	-	-	-	-	-	-	3
West Ham Central Mission London E.13	-	2	-	-	-	-	-	2	-	-
British Home & Hospital for Incurables, Streatham S.W.16.	-	1	-	-	-	-	-	-	-	1
Coombe Farm Residential Centre, Croydon	-	1	-	-	-	-	-	-	-	1
Tudor House, Grayshott	1	-	-	-	-	-	-	-	1	-

Continued on next page



Accommodation Provided in	Resident on 1. 1. 68		Admitted during year		Discharged during year		Died during year		Remaining on 31.12.68	
	M	F	M	F	M	F	M	F	M	F
St. Mildred's Court Westgate-on-Sea	-	1	-	-	-	-	-	-	-	1
Oakhill House, Horsham	1	-	1	-	-	-	-	-	2	-
'Cliff Dene, Tankerton	-	2	-	-	-	-	-	-	-	2
Glebe House, Colchester	-	1	-	-	-	-	-	-	-	1
Lantern Hotel, Worthing	-	1	-	-	-	1	-	-	-	-
The Priory, Worthing	-	1	-	-	-	-	-	-	-	1
Grosvenor House, St. Leonards-on-Sea	-	1	-	-	-	-	-	-	-	1
Wix House, London N.4	-	1	-	-	-	1	-	-	-	-
British Home for Deaf and Dumb Women, London, E.5	-	1	-	-	-	-	-	-	-	1
Horder Centre for Arthritics, Crowborough	-	1	-	-	-	1	-	-	-	-
Morton House, Hemel Hempstead	1	1	-	-	-	-	-	1	1	-
Mildred Duff Memorial Home North Walsham	-	2	-	-	-	2	-	-	-	-
Ryelands, Wallington	-	1	-	-	-	-	-	-	-	1
St. Bridget's, East Preston	-	1	-	-	-	-	-	-	-	1
School of Stitchery, Bookham	-	1	-	-	-	-	-	-	-	1
The Grove, East Carleton, Norwich	-	1	-	-	-	1	-	-	-	-
Priceholme, Scarborough	-	1	-	-	-	-	-	-	-	1
Ponds, Beaconsfield, Bucks	-	1	-	-	-	-	-	-	-	1
The Lindens, St. Leonards-on-Sea	-	1	-	-	-	-	-	-	-	1
Lister House, Sharow	1	-	-	-	-	-	-	-	1	-
Ashley House, Bognor Regis	-	-	1	-	-	-	-	-	1	-
Elmside, Hitchin	-	-	1	-	-	-	-	-	1	-
Elmwood, Bickley	-	-	-	1	-	-	-	-	-	1
Glengall Eventide Home, Woodford Green	-	-	-	1	-	-	-	-	-	1
Maurice House, Westgate-on-Sea	-	-	1	-	-	-	1	-	-	-

# ROCHE CLOSE

	Males	Females	Total
Resident on 1. 1. 68	63	242	305
Admitted from home addresses	47	84	131
Admitted from Rochford Hospital	21	70	91
Admitted from Southend General Hospital	3	10	13
Admitted from Runwell Hospital	1	4	5
Admitted from other hospitals	-	1	1
Admitted from Priory House	-	1	1
Admitted from Crowstone House	-	2	2
Admitted from Whittingham House	1	-	1
Admitted from Brook House	-	1	1
Admitted from Delaware House	1	2	3
Admitted from Lulworth Court	1	-	1
	138	417	555
Discharged to home addresses	23	25	48
Discharged to Rochford Hospital	22	62	84
Discharged to Southend General Hospital	2	9	11
Discharged to Runwell Hospital	-	4	4
Discharged to Pantile House	5	4	9
Discharged to Whittingham House	5	2	7
Discharged to Crowstone House	-	5	5
Died in Roche Close	31	66	97
Discharged to Brook House	-	2	2
Discharged to Delaware House	2	4	6
Discharged to Priory House	-	2	2
Resident on 31st December 1968	48	232	280

## Age Groups of Residents

Under 65	9	8	17
65 - 69	2	11	13
70 - 74	1	18	19
75 - 79	12	35	47
80 - 84	10	60	70
85 - 89	9	64	73
90 and over	5	36	41
	48	232	280

# CROWSTONE HOUSE

	Females
Resident on 1.1. 68	58
Admitted from home addresses	21
Admitted from Roche Close	5
Admitted from Rochford Hospital	1
	85
Discharged to Roche Close	2
Discharged to Southend General Hospital	1
Discharged to home addresses	11
Discharged to Rochford Hospital	3
Died in Crowstone House	9
Resident on 31st December 1968	59

## Age groups of Residents

Under 65	1
65 - 69	2
70 - 74	2
75 - 79	14
80 - 84	11
85 - 89	18
90 and over	11
	59

### PANTILE HOUSE

	Males	Females	Total
Resident on 1.1.68	26	35	61
Admitted from home addresses	14	24	38
Admitted from Roche Close	5	4	9
Admitted from Rochford Hospital	1	-	1
Admitted from Priory House	-	1	1
Admitted from Westcliff Hospital	-	1	1
	46	65	111
Discharged to Runwell Hospital	-	1	1
Discharged to home addresses	10	10	20
Discharged to Rochford Hospital	1	-	1
Discharged to Southend General Hospital	1	1	2
Died in Pantile House	13	16	29
Resident on 31st December 1968	21	37	58

#### Age Groups of Residents

	Males	Females	Total
Under 65	-	1	1
65 - 69	1	1	2
70 - 74	1	3	4
75 - 79	5	9	14
80 - 84	8	10	18
85 - 89	4	9	13
90 and over	2	4	6
	21	37	58

### WHITTINGHAM HOUSE

	Males	Females	Total
Resident on 1.1. 68	21	40	61
Admitted from home addresses	8	16	24
Admitted from Roche Close	5	2	7
Admitted from Victoria Hospital	-	1	1
Admitted from Southend General Hospital	-	1	1
Admitted from Runwell Hospital	1	-	1
	35	60	95
Discharged to Southend General Hospital	-	1	1
Discharged to home addresses	7	7	14
Discharged to Rochford Hospital	-	4	4
Discharged to Roche Close	1	-	1
Discharged to Chelmsford Hospital	1	-	1
Died in Whittingham House	2	9	11
Resident on 31st December 1968	24	39	63

#### Age Groups of Residents

	Males	Females	Total
Under 65	-	1	1
65 - 69	1	1	2
70 - 74	3	7	10
75 - 79	6	3	9
80 - 84	8	8	16
85 - 89	4	15	19
90 and over	2	4	6
	24	39	63



### DELAWARE HOUSE

	Males	Females	Total
Resident on 1.1. 68	20	40	60
Admitted from home addresses	9	18	27
Admitted from Roche Close	2	4	6
Admitted from Southend General Hospital	-	2	2
	31	64	95
Discharged to Roche Close	1	2	3
Discharged to home addresses	1	8	9
Discharged to Rochford Hospital	2	4	6
Died in Delaware House	7	9	16
Resident on 31st December 1968	20	41	61

#### Age Groups of Residents

Under 65	-	-	-
65 - 69	1	1	2
70 - 74	3	3	6
75 - 79	4	7	11
80 - 84	6	10	16
85 - 89	5	11	16
90 and over	1	9	10
	20	41	61

### BROOK HOUSE

	Males	Females	Total
Resident on 1.1. 68	20	40	60
Admitted from home addresses	9	8	17
Admitted from Roche Close	-	2	2
Admitted from Rochford Hospital	-	1	1
Admitted from Southend General Hospital	1	-	1
	30	51	81
Discharged to Southend General Hospital	4	2	6
Discharged to home addresses	3	2	5
Discharged to Roche Close	-	1	1
Discharged to Rochford Hospital	1	1	2
Died in Brook House	2	5	7
Resident on 31st December 1968	20	40	60

#### Age Groups of Residents

	Males	Females	Total
Under 65	-	-	-
65 - 69	2	2	4
70 - 74	1	6	7
75 - 79	4	7	11
80 - 84	2	9	11
85 - 89	9	8	17
90 and over	2	8	10
	20	40	60

PRIORY HOUSE

	Males	Females	Total
Resident on 1.1.68	13	46	59
Admitted from home addresses	4	13	17
Admitted from Roche Close	-	2	2
	17	61	78
Discharged to home addresses	3	7	10
Discharged to Roche Close	-	1	1
Discharged to Pantile House	-	1	1
Discharged to Rochford Hospital	-	2	2
Discharged to Southend General Hospital	-	1	1
Died in Priory House	1	2	3
	13	47	60

Age Groups of Residents

Under 65	-	1	1
65 - 69	1	2	3
70 - 74	2	1	3
75 - 79	1	14	15
80 - 84	4	12	16
85 - 89	3	10	13
90 and over	2	7	9
	13	47	60

Age Groups of Residents

	Males	Females	Total
Under 65	-	-	-
65 - 69	2	2	4
70 - 74	1	6	7
75 - 79	4	7	11
80 - 84	2	9	11
85 - 89	9	8	17
90 and over	2	8	10
	20	40	60

PRIORY HOUSE

	Males	Females	Total
Resident on 1.1.68	13	46	59
Admitted from home addresses	4	13	17
Admitted from Roche Close	-	2	2
	17	61	78
Discharged to home addresses	3	7	10
Discharged to Roche Close	-	1	1
Discharged to Pantile House	-	1	1
Discharged to Rochford Hospital	-	2	2
Discharged to Southend General Hospital	-	1	1
Died in Priory House	1	2	3
	13	47	60

Age Groups of Residents

Under 65	-	1	1
65 - 69	1	2	3
70 - 74	2	1	3
75 - 79	1	14	15
80 - 84	4	12	16
85 - 89	3	10	13
90 and over	2	7	9
	13	47	60

**Temporary Accommodation**

During the year, temporary accommodation was provided at Roche Close as under:-

	No. of cases	Length of stay
Individual men	7	4 for 1 night 2 for 2 nights 1 for 4 nights
Individual women	10	5 for 1 night 2 for 2 nights 1 for 3 nights 2 for 5 nights
Married couple	1	1 night
Mother and 1 child	5	2 for 1 night 1 for 2 nights 2 for 4 nights
Mother and 3 children	4	1 for 1 night 3 for 3 nights
Mother and 4 children	2	1 for 1 night 1 for 2 nights

**Floods September 1968**

In addition to the above, temporary accommodation was provided for families, mainly from Thornford Gardens, Prittlewell, who were rendered homeless by storm water flooding on 15. 9. 68. Accommodation was made available in four of the residential homes - Crowstone House, Pantile House, Priory House and Whittingham House - for 24 adults and 12 children. Except for 2 elderly ladies who stayed longer, all were able to return home within a week.

**Blind Welfare**

Whilst the Local Authority has statutory obligations for the welfare of the blind, their social needs are very adequately catered for by the Southend-on-Sea Blind Welfare Organisation which, in addition to providing club facilities, arranges social functions, outings, etc. and has a residential home for 12 blind residents combined with a social club in Imperial Avenue. This is a very active organisation of which the town can be justly proud.

**Wireless**

The British Wireless for the Blind Fund supplied 30 new wireless sets during the year.



Age Groups of Registered Blind Persons																			
	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and Over	Total
Males	-	-	-	-	-	-	1	1	3	3	12	22	13	23	64	38	27	13	220
Females	-	-	-	-	-	1	-	1	4	6	10	17	19	28	122	88	97	51	444
Total	-	-	-	-	-	1	1	2	7	9	22	39	32	51	186	126	124	64	664

Age at onset of Blindness																			
	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Total
Males	13	-	-	1	1	2	3	7	9	7	16	21	22	28	45	27	16	2	220
Females	21	-	2	-	2	5	2	4	7	3	14	47	29	51	136	65	44	12	444
Total	34	-	2	1	3	7	5	11	16	10	30	68	51	79	181	92	60	14	664

Registration

Register of the Blind

	Males	Females	Total
Number on Register 1.1.68	214	430	644
Left Borough during year	3	8	11
Re-registered	-	2	2
Died during year	25	36	61
Transfers in from other areas	5	5	10
Newly registered	29	51	80
On Register 31.12.68	220	444	664
In Homes for the Blind	-	13	13
In other Homes including Part III	12	62	74
In Hospitals for Mentally Sub-Normal	-	1	1
In Hospitals for the Mentally III	1	2	3
Other Hospitals	1	2	3

Register of Partially Sighted

Number on Register 31.12.68	61	114	175
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Cases newly registered during year

Forms B.D.8 were received in respect of the following:-

	Males	Females	Total
Certified Blind	29	51	80
Certified partially-sighted	<u>13</u>	<u>21</u>	<u>34</u>
	<u>42</u>	<u>72</u>	<u>114</u>

Newly Registered Blind Persons - Age Groups and Causes of Blindness

Causes of Blindness	Age Group				
	Up to 59	60 - 69	70 - 79	80 - 89	90 and over
Primary Cataract:					
Suitable for surgical treatment	-	-	2	4	1
Not suitable for surgical treatment	-	-	1	4	1
Primary Glaucoma	-	-	3	4	2
Macular Degeneration	1	-	7	21	3
Diabetic Retinopathy	-	1	5	-	-
Myopic choroido-retinal degeneration	-	3	1	1	-
Retina defects	-	1	-	2	-
Aphakia	-	-	3	2	-
Hypertension	-	1	-	-	-
Hysterical blindness	-	-	-	1	-
Trauma	-	-	-	2	-
Corneal Dystrophy	-	-	1	1	-
Choroidal sclerosis	-	-	1	-	-
	1	6	24	42	7

Partially Sighted

Persons whose names were entered during 1968 in the register of the partially sighted were aged:-

5 - 15	21 - 49	50 - 64	65 and over	Total
1	1	1	31	34

Follow-up of Registered Blind and Partially Sighted Persons

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which Section F of Form B.D.8. recommends:				
(a) No treatment	2	3	-	47
(b) Treatment (medical, surgical or optical)	19	11	-	32
(ii) Number of cases at (i)(b) above which on follow-up action have received treatment	13	10	-	29

Ophthalmia Neonatorum

No injury to vision resulted from this cause.

Work of the Home Teachers

A total of 1488 visits was made to blind persons in their homes, during which 52 lessons in embossed type and 12 lessons in handicrafts were given.

Handicraft classes met weekly, instruction being given in chair-caning, weaving, netting, string bag making, basket making and other crafts.

Home Workers

At the end of the year there were 4 home workers in receipt of augmentation of wages, 1 engaged in basket making, 2 in circular machine knitting, and 1 in piano tuning.

Periodicals

Periodicals in Braille and Moon type continued to be supplied free of charge to local blind readers, whilst many of them continued to avail themselves of the library facilities afforded by the National Library for the Blind, to which you make an annual grant.

Use of Deck Chairs on Promenade and Cliffs

Passes were issued to 440 blind people by the Council's Entertainments Committee, enabling them to use deck chairs on the promenades and cliffs - a privilege much appreciated.

Transport Passes

Renewal transport passes were issued by the Joint Transport Undertaking to 93 registered blind persons who had previously been accorded this privilege. We are grateful to the Undertaking for this continued concession.



## Meals on Wheels

The Women's Royal Voluntary Service maintained its invaluable help to the old and the handicapped, delivering some 220 meals on four days each week. The school meals service supplied the meals. We are all grateful for the assistance so willingly afforded by the Education Committee and its staff.

## Welfare of the Deaf

Mention was made in previous reports of the necessity for welfare responsibilities in connection with the deaf to be taken over from the Royal Association in Aid of the Deaf and Dumb. The arrangements with the Essex County Council for the use of its specialist officer to deal with the major difficulties of the deaf and dumb persons in Southend, whilst ordinary day to day welfare duties are undertaken by your own social and mental welfare officers, are working satisfactorily.

## The Hard of Hearing

The Southend-on-Sea Hard of Hearing Group, which maintains its success, meets weekly in the Clarence Road Liberal Hall. In addition to catering for the needs of its more elderly members, the newly formed youth section has made a promising start. The grant made by the Council defrays the cost of renting the premises, but for the rest the group is self supporting and one is grateful for yet another example of mutual help and enterprise.

## Handicapped Persons - General Classes

There was an increase in registered handicapped persons at the end of the year of 143, making a total on the register of 944. This is the number of persons currently being assisted by the social and mental welfare officers and bears no relation to the number of those who could be described as permanently and substantially handicapped. The numbers on the register will, of course, increase for some years as more people requiring assistance come to our notice, but the prevailing shortage of staff determines the rate of development in this particular field.

Statutory powers allowed practical assistance by way of structural alterations in the homes of 47 handicapped persons at a total cost of £871. 8s. 9d. There was also an increasing demand for the loan of "gadgets" and equipment. Thirty-three handicapped persons were assisted financially to take holidays specially arranged to suit their disabilities, mainly in conjunction with the Essex Association for the Physically Handicapped.

Disability	Male	Female
Amputation	75	24
Arthritis and Rheumatism	76	275
Congenital Malformations and Deformities	22	21
Diseases of the Digestive and Genito-Urinary Systems, of the Heart or Circulatory System, Respiratory System and of the skin	33	28
Injuries of the Head, Face, Neck, Thorax, Abdomen, Pelvis or Trunk, Injuries or Diseases of the Upper and Lower Limbs and of the spine	48	34
Organic Nervous Diseases, Epilepsy, Disseminated Sclerosis, Poliomyelitis, Hemiplegia, Sciatica, etc.	128	132
Neuroses, Psychoses and other Nervous and Mental disorders, not included above	9	7
Tuberculosis (Respiratory)	-	1
Tuberculosis (Non-Respiratory)	6	4
Diseases and Injuries not specified above	7	14
Totals	404	540

**Car Badges**

At the end of the year, 150 badges were in issue compared with 133 at 31.12.67 and there is no doubt that this number will increase, as the benefits of free parking in the Corporation car parks and at parking meters are a valuable concession to the handicapped driver.

**SECTION 37 - REGISTRATION OF DISABLED PERSONS' OR OLD PERSONS' HOMES**

	Registered at 31.12.68	
	No.	No. of Beds
<b>Homes for Old People</b>		
Voluntary	9	319
Private	*34	285
<b>Homes for Old and Disabled Persons</b>		
Voluntary	† 3	43
Private	6	53
<b>Homes registered under Southend-on-Sea Corporation Act, 1947, Section 144</b>		
	3	24

\* includes 2 Homes also registered under Southend-on-Sea Corporation Act  
† includes 1 Home also registered under Southend-on-Sea Corporation Act

**SECTION 47 - REMOVAL OF PERSONS IN NEED OF CARE AND PROTECTION**

This Section empowers the removal of persons "suffering from grave chronic disease" or who "being aged, infirm or physically incapacitated are living in insanitary conditions" and, under proper safeguards, their detention in hospitals or other suitable institutions.

It was necessary to take formal action under this Section in one case during the year.

**SECTION 48 - TEMPORARY PROTECTION FOR PROPERTY OF PERSONS ADMITTED TO HOSPITALS AND OTHER INSTITUTIONS**

Under this Section of the Act, the Local Authority have a duty to protect the moveable property of any person admitted to hospital or Part III accommodation if it appears to them that there is danger of loss of, or damage to, such property and that no other suitable arrangements have been made: 29 such cases came to the notice of the department during the year, involving 289 visits.

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